**Restaurant Customer Review Form**

**Basic Information**

* **Restaurant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Visit Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Meal Time (Breakfast/Lunch/Dinner): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Rate Your Experience**

| **Aspect** | **Rating (1-5)** | **Comments** |
| --- | --- | --- |
| **Food Quality** |  |  |
| **Service Quality** |  |  |
| **Ambiance** |  |  |
| **Cleanliness** |  |  |
| **Value for Money** |  |  |
| **Menu Variety** |  |  |
| **Staff Friendliness** |  |  |

**Overall Impression**

* **Highlight Your Favorite Moment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Areas That Need Improvement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Customer Information (Optional)**

* **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**