

Stakeholder Feedback Summary Sheet

Project & Deliverable Details

Project Name

Consulting Deliverable

Date

Stakeholder Information

Stakeholder Name

Role/Title

Department/Organization

Feedback Summary

Feedback Area	Comments	Suggested Actions
e.g. Clarity, Relevance	Enter feedback comments	Suggested actions

Overall Satisfaction

Stakeholder Satisfaction (1=Low, 5=High)

Additional Comments

