

EXAM FEEDBACK FORM

Use this form to describe in detail the specific feedback of GSMR Certification Exam. Include your contact information, ID number, name of the exam, the date you took the exam, location of the testing center and the type of feedback.

Feedback on the exam application process, testing experience, or any aspect of the certification program can be directed to the GSMR Certification Administrator. Concerns regarding impartiality, fairness, or discrimination will be carefully reviewed.

The submission should present adequate objective evidence to support the claims, enabling a decision to be reached and the necessary actions to be implemented. Complaints founded purely on hearsay will not qualify as valid feedback. All feedback will be assessed and addressed by GSMR at its sole discretion.

Within **three calendar days** of taking the exam, submit the written form by e-mail to certification@gsmrgulf.org with "MARC Program Feedback Form" in the subject line.

You will be notified via email upon the receipt of your submission. At that point, you will either be informed of the evaluation outcome or, if additional time is required, provided with an estimated timeframe for the decision.

Full Name	
E-mail Address	
Mobile No	
Exam Portal	
ID No	
Exam Name	
Exam Date (MM/DD/YY) (When did you take the exam)	
Test Center Name & Location (Where did you take the exam)	
Country	
Feedback Type (application process, exam process, testing experience, exam item etc.)	





Feedbac	k : (The	feedback	should	include,	but is	not	limited	to,	the	nature	of	the	issues
surround	ling the f	feedback,	the facts a	and supp	orting d	ocume	entation)					
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Note:

- Exam feedback is intended solely for the purpose of improving the exam process and content.
- Individual scores will not be altered based on feedback.
- Changes to scores are only considered if a verified error is identified in the grading process.