(1) MTCS HWIFS;

1, NEW STARTER TEST INDUCTION DATE COMPLETED

(NAME) (PASS MARK) (RE TEST PASS MARK) (DEVELOPMENT PLAN) (NOTES)

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2, ANALYST QTRLY TEST / RED / AMBER / GREEN

(NAME) (PASS MARK) (RE TEST PASS MARK) (DEVELOPMENT PLAN) (NOTES) (DATE)

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3, CALL LISTENING (CLIENT NAME) (ANALYST) / RED MONTHLY / AMBER QTRLY / GREEN QTRLY (NOTES) (DATE)

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4, CS NOTES / RECOMMENDATION / ACTIONS;

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(3)CALL LISTENING LIVE AND RECORDED;

AR / ANALYST / CLIENT / DATE

NOTES

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SUMMARY/RECOMMENDATION;

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(4)DEVELOPMENT PLAN

AREA OF IMPROVEMENT AND ACTIONS REQUIRED;

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ACTIONS COMPLETED

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HWIFS / CS SIGN OFF

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(2) COMPLAINTS / CFI / RED / AMBER / GREEN / DATE AND REASON WHY:

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CUSTOMER CONTACTED / CASE RESOLVED / CALL ANALYSIS / ACTIONS REQUIRED

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