## QUESTIONNAIRE

## Name of the Respondent

## Designation

1. Does the He respective fun	ead of Your Department divide the work among team members so that each member can get specialization in ctions?
YES	NO
2. Do you have	e the authority for the prerequisites for fulfillment of the responsibility?
YES	NO
3. Does your	organization honors and follow a common code of conduct for reporting time, leave, overtime allowance etc.
YES.	NO
4. Do you rece	ive order from more than one boss?
YES	NO
5. Do you have	e one head and one plan for your department?
YES	NO
6. Can you sac	rifice your Personal Interest over Organizational Interest?
YES	NO
7. Is a Remun	eration payable to you is sufficient to give you a reasonable standard of living?
YES	NO
8. In Your Orga	anization whether power of decision making to concentrated with one person or dispersed among many?
YES	NO
9. Can you dire	ectly communicate with CEO of your company without following formal line of communication?
YES.	NO
10. Whether p	roper and fixed place have been given to each and every employee of organization?
YES	NO
11. Whether a	Il employee of your organization treated a like without any discrimination based on religion, caste or gender?
YES	NO
12. Whether y	ou have been transferred frequently to different branches of your organization?
YES	NO
13. Whether a	ll employee of organization are encouraged to develop and carry out the plans for Improvements?
YES	NO
14. Does the n	nanagement promote team spirit and harmony among employees?
YES	NO