**CONTRACTOR PERFORMANCE EVALUATION REPORT**

Contract Number:

Contractor:

Evaluator/Administrator:

Date Submitted:

Period of Evaluation From: To:

RATE CONTRACTOR’S PERFORMANCE ON A SCALE OF 1 TO 5 (by circling)

1. Overall Evaluation

Unsatisfactory 1 2 3 4 5 Satisfactory

2. Delivery Performance

Late/Early (if problem) 1 2 3 4 5 On Time

3. Quality of Goods/Services

Unacceptable 1 2 3 4 5 Acceptable

4. Number of Complaints

High 1 2 3 4 5 Low

Explain any complaints below.

5. Contractor’s Responsiveness to requests to correct deficiencies:

Nonresponsive 1 2 3 4 5 Takes prompt

corrective action

6. Renew this contract?

YES\_\_\_ NO\_\_\_ If No, Please explain in comments below.

Note: Any score of 3 or less must be described in detail below as to what action was taken to remedy the contractor’s poor performance and what steps the contractor took to correct the deficiency cited. (Continue on separate sheet if necessary.)

7. COMMENTS: