**SUPPLIER PERFORMANCE EVALUATION TEMPLATE**

|  |  |  |  |
| --- | --- | --- | --- |
| **VENDOR NAME** |   | **CONTRACT REFERENCE NUMBER** |   |
| **CONTRACT DESCRIPTION** |   | **TIME PERIOD COVERED** |   |
| **EVALUATING PARTY NAME** |   | **DATE EVALUATION COMPLETED** |   |

|  |  |  |
| --- | --- | --- |
| **SCORE KEY** | **2** | **Adequate; Meets some expectations** |
| **5** | **Very Good; Exceeds expectations** |  | **1** | **Unsatisfactory; Misses most expectations** |
| **4** | **Good; Meets expectations** |  | **0** | **Substandard; Falls far below expectations** |
| **3** | **Standard; Meets most expectations** |  | **N/A** | **Not Applicable** |

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| **EVALUATION CATEGORY** | **PERFORMANCE EXPECTATIONS** | **SCORE** | **CORRECTIVE ACTION DESCRIPTION– IF NECESSARY –** | **ADDITIONAL INFO** |
| ADMINISTRATION | Required documentation / reports submitted |  |   |   |
| Invoices submitted on time |  |   |   |
| Invoice accuracy |  |   |   |
| Contract completed on budget |  |   |   |
| Competitive change order pricing provided |  |   |   |
| Financial aspects monitored and tracked |  |   |   |
|   |  |   |   |
|   |  |   |   |
|   |  |   |   |
| ADMINISTRATION TOTAL SCORE |  |   |   |

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| **EVALUATION CATEGORY** | **PERFORMANCE EXPECTATIONS** | **SCORE** | **CORRECTIVE ACTION DESCRIPTION– IF NECESSARY –** | **ADDITIONAL INFO** |
| SCOPE | Deliverable completed to quality standards |  |   |   |
| Adhered to specifications of contract |  |   |   |
| Demonstrated flexibility |  |   |   |
| Provided innovative input  |  |   |   |
| Substantiated change orders |  |   |   |
| Corrections made quickly when necessary |  |   |   |
| Problem areas recognized and corrected |  |   |   |
|   |  |   |   |
|   |  |   |   |
|   |  |   |   |
| SCOPE TOTAL SCORE |  |   |   |
| STAFF | Adequate staff present |  |   |   |
| Staff is professional and competent |  |   |   |
|   |  |   |   |
|   |  |   |   |
| STAFF TOTAL SCORE |  |   |   |

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| **EVALUATION CATEGORY** | **PERFORMANCE EXPECTATIONS** | **SCORE** | **CORRECTIVE ACTION DESCRIPTION– IF NECESSARY –** | **ADDITIONAL INFO** |
| COMMUNICATIONS | Communicated effectively and openly |  |   |   |
| Positive and professional character and conduct |  |   |   |
|   |  |   |   |
|   |  |   |   |
| COMMUNICATIONS TOTAL SCORE |  |   |   |
| SCHEDULE | Work efficiently planned |  |   |   |
| Provides required schedules and plans  |  |   |   |
| Milestones met |  |   |   |
|   |  |   |   |
| SCHEDULE TOTAL SCORE |  |   |   |
| HEALTH & SAFETY | OSHA compliant |  |   |   |
| Other laws compliant |  |   |   |
| Other bylaws compliant |  |   |   |
|   |  |   |   |
| HEALTH & SAFETY TOTAL SCORE |  |   |   |
| **TOTAL SCORE** |   |   |   |
|  |  |  |  |  |
| OVERALL EVALUATION COMMENTS |
|   |