

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACTORS PERFORMANCE REPORT PROFESSIONAL SERVICES Report Period Start Report Period End **Contract Period Start** Contract Period End Purchaser Order Number Purchase Order Date Department **Bid Number** Service Commodity Contractor **Performance Rating** Archives contract requirements less than 50% of the time not responsive, effective and/or efficient; unacceptable delay; incompetence; high degree of 0 = Unsatisfactory customer dissatisfaction. Archives contract requirements 70% of the time. Marginally responsive, effective and/or efficient; delays require significant adjustments to programs; key 1 = Pooremployees marginally capable; customer somewhat satisfied. Archives contract requirements 80% of the time. Generally responsive, effective and/or efficient; delays are excusable and/or results in minor programs 2 = Satisfactory adjustments; employees are capable and satisfactorily providing service without intervention; customers indicate satisfaction. Archives contract requirements 90% of the time. Usually responsive: effective and/or efficient; delays have not impact on programs/mission; key employees 3 = Goodare highly competent and seldom require guidance; customers are highly satisfied Archives contract requirements 100% of the time. Immediately responsive; highly efficient and/or effective; no delays; key employees are experts and 4 = Excellent require minimal directions; customers expectations are exceeded. (Specification Compliance - Technical Excellence -1. Quality of Goods/Services Reports/Administration – Personnel Qualification 0 1 2 3 4 (Were Milestones Met Per Contract – Response Time (per 2. Timeliness of Performance agreement, if applicable) - Responsiveness to Directions/ Change – On Time Completion Per Contract) 0 1 2 3 4

3. Business Relations			(Responsiveness to Inquires – Prompt Problem Notifications)		
0					
1					
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4					
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0					
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5. Contractors Key Personnel (Cre			redentials/Experience Appropriate – Effective		
3. Contractors key Personner		Su _l	pervision/Management – Available as Needed)		
0					
1					
2					
3					
4					
Overall Performance Rating		ng	Date		

After completing the form: Submit to Purchasing Print a copy for your records Save the form

Rating completed by:

Department Head Name:

Department Head Signature

Would you select/recommend this vendor again?