



Office of Strategic Sourcing and Procurement
Contractor Performance Evaluation

Contractor Information – Part A			
Contractor Name:		PO Number:	
Term of Contract:		Contract Amount:	
Description of Service			

Department Information – Part B				
Department Name:				
Director/Contact Name:	Phone:		Email:	
Contracting Officer Name:	Phone:		Email:	
Contract Specialist Name:	Phone:		Email:	
Contract Administrator Name:	Phone:		Email:	
Commodity Buying Group:				

Evaluator Information – Part C					
Evaluator Name:					
Title:					
Department:					
Address:		Building:		Room:	
City:		State:		Zip Code:	
Phone Number:		Fax Number:			
Email Address:					
Evaluation Review Period:	Start Date:		End Date:		

Description – Part D		
1.	Caption/Description:	
2.	Contract Type:	
3.	NIGP Code:	
4.	Solicitation Number:	
5.	Contract Number:	Purchase Order Number:
6.	Contract Award Amount:	
7.	Contract Period:	
8.	Contract Year:	
9.	Tax ID Number:	Banner ID Number:
10.	Contractor Name:	
11.	Contact Name:	Phone Number:
12.	Email Address:	
13.	Street Address:	
14.	City, State, Zip Code:	
15.	Telephone Number:	
16.	Fax Number:	
17.	Market Type:	
18.	Recurring Contract?	
19.	Multi-Year Contract?	
20.	LSDBE?	
21.	Not For Profit?	

Contractor Performance Evaluation

1. Product Quality:

The delivered goods or services conformed to the specific contract requirements/scope of work:

Comments:

2. Delivery Performance:

The goods or services met the agreed upon final delivery date, and was delivered per instructions:

Comments:

3. Cost Control:

The contractor performed/delivered at or below the contract price:

Comments:

4. Management/Business Relations:

The contractor was cooperative and communicated effectively:

Comments:

5. Conclusion:

Final Grade:

Did the Evaluator consider input from the Contracting Officer, Program Personnel, End-Users, and Others affected by the contract?

If no, provide explanation:

Evaluator Name:

Evaluator Title:

Date of Evaluation:

Final Comments: