

GANADO ISD

VENDOR/CONTRACTOR PERFORMANCE EVALUATION

Instructions: Use this form to evaluate the overall performance of vendors you are currently working with. Include all information associated with the vendor and apply a performance rating. Definitions are provided below. Be factual and do not include unsubstantiated opinions. Vendor performance evaluations are recommended for all vendors to report all levels of service: **Exceptional, Satisfactory, Marginal, or Unsatisfactory**. Vendors receiving an overall Unsatisfactory rating will be informed of the rating by the Purchasing Department and will be provided a reasonable opportunity to respond.

Vendor Name: _____ PO Number: _____
 Date of Rating: _____ Campus or Department: _____

Definitions of Performance Ratings: [If a rating does not apply, enter N/A]

Exceptional Exceeds contractual requirements. The actions taken by the vendor met the contractual requirements and scope of services were accomplished.	Satisfactory Meets contractual requirements. The actions taken by the vendor were satisfactory.	Marginal Vendor did not initially meet contractual requirements. Corrective actions implemented by vendor that resolved identified deficiencies.	Unsatisfactory Vendor did not meet contractual requirements and remedy is not likely in a timely manner. The vendor's corrective actions were ineffective.
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PERFORMANCE AREA	RATING	COMMENTS
Work performed in compliance with contract terms and within the agreed-upon timeline.	<input type="checkbox"/> Exceptional <input type="checkbox"/> Satisfactory <input type="checkbox"/> Marginal <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> N/A	
Services and/or materials, supplies and/or equipment were provided as required?	<input type="checkbox"/> Exceptional <input type="checkbox"/> Satisfactory <input type="checkbox"/> Marginal <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> N/A	
Customer Service (including communication, availability, and prompt and effective correction of situations and conditions)	<input type="checkbox"/> Exceptional <input type="checkbox"/> Satisfactory <input type="checkbox"/> Marginal <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> N/A	
Quality of work and/or supplies (including compliance with safety standards and contract specifications)	<input type="checkbox"/> Exceptional	

	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Marginal <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> N/A	
Overall Rating	<input type="checkbox"/> Exceptional <input type="checkbox"/> Satisfactory <input type="checkbox"/> Marginal <input type="checkbox"/> Unsatisfactory	

Would you recommend using this vendor/contractor again? ____ Yes ____ No

Signature

Title

Date