

CONTRACTOR SUBCONTRACTOR PERFORMANCE EVALUATION

TO: (1) CONTRACT ADMINISTRATION GROUP DATE: _____
(2) PURCHASING

FROM: _____ Field Contract Administrator
(Name)

NAME OF CONTRACTOR OR SUBCONTRACTOR _____

WORK OR JOB PERFORMED _____

PLANT AREA _____ JOB # OR RELEASE # _____ DATE _____

PLANT AREA _____ JOB # OR RELEASE # _____ DATE _____

1. Compliance with safety, environmental, and housekeeping requirements:
() Poor () Fair () Average () Good () Excellent

2. Quality of work:
() Poor () Fair () Average () Good () Excellent

3. Speed in getting the job done:
() Poor () Fair () Average () Good () Excellent

4. Quality of Contractor's Supervision:
() Poor () Fair () Average () Good () Excellent

5. Attitude and cooperation in handling necessary paper work:
() Poor () Fair () Average () Good () Excellent

6. Proper tools and equipment for the work involved:
() Poor () Fair () Average () Good () Excellent

7. Recommend for future work? () YES () NO (Explain Fully Below)

8. REMARKS: Use the space below (and back of page if necessary) to fully explain any of the above evaluations: