

NORTHWESTERN STATE UNIVERSITY
of
Natchitoches, Louisiana
CONTRACTOR PERFORMANCE EVALUATION

To be completed by the Department/Budget Unit Head

AGENCY NAME Northwestern State University
DEPARTMENT/BUDGET UNIT HEAD _____
*PROFESSIONAL SERVICE NO. _____
*DOA CONTRACT NUMBER _____
*CFMS/OCR CONTRACT NO. _____
CONTRACTOR'S NAME _____
CONTRACTOR'S ADDRESS _____
CONTRACT AMOUNT _____
ACTUAL AMOUNT PAID _____
** CONTRACT COST BASIS _____
CONTRACT BEGINNING DATE _____
CONTRACT ENDING DATE _____
ACTUAL BEGIN & END DATE _____
CONTRACT MODIFICATIONS _____
NUMBER _____
REASON(S) _____

_____*Explanation of how you arrived at the cost in a FAIR AND EQUITABLE MANNER(example: RFP, Hourly Rate, or etc.) Actual amount paid represents fair market compensation and all expenses.

DESCRIPTION OF SERVICES RENDERED: (What were the service provided?)

DELIVERABLE PRODUCTS: (What were final products, if any. Were they delivered on time? Were they usable...)

OVERALL PERFORMANCE: (List weak points, strong points. Would you hire this contractor again?)

NAME & PHONE NO. OF PERSON RESPONSIBLE FOR MONITORING & FINAL ACCEPTANCE OF CONTRACT _____

* To be filled in by Purchasing Department

PROJECT DIRECTOR DATE

VICE PRESIDENT DATE