



# Past Performance Questionnaire

<b>Customer Information</b>			
Customer organization		Address	
Respondent's name		Telephone number	
Title		Fax number	
Signature		Date	
<b>Contract information</b>			
Contract name		Contract number	
Contractor (company and division)			
Type of contract CPAF	<input type="checkbox"/> Cost reimbursable	<input type="checkbox"/> Fixed price	<input type="checkbox"/> Indefinite quantity

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Please evaluate the contractor's performance in the areas described below by providing an appropriate rating and any comments.

- |                     |  |
|---------------------|--|
| <b>Outstanding</b>  | Contractor performance in this area exceeded contract requirements a significant amount of the time. |
| <b>Good</b>         | Contractor performance in this area generally met and sometimes exceeded contract requirements.      |
| <b>Satisfactory</b> | The contractor generally met the contract requirements in this area but experienced some problems.   |
| <b>Marginal</b>     | The contractor experienced several significant problems in this area during contract performance.    |

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**1. Quality of services**

Please evaluate the contractor's performance in the areas described below by providing an appropriate rating and any comments.

Outstanding     Good     Satisfactory     Marginal

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**2. Compliance with contract**

Evaluate the extent to which the contractor complied with contract provisions, administrative requirements, adherence to schedules, project milestones, completed efforts on time, accurate reporting in management, progress and financial.

Outstanding     Good     Satisfactory     Marginal

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**3. Appropriateness of personnel**

Evaluate the extent to which the contractor selected personnel for various positions.

Outstanding     Good     Satisfactory     Marginal

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**4. Overall performance in planning and controlling the program**

Outstanding     Good     Satisfactory     Marginal

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**5. Ability to manage and control personnel**

Outstanding     Good     Satisfactory     Marginal

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**6. Are you aware of any contractor/employee payroll problems?**

Yes                       No

If so, describe.

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**7. Ability to provide effective solutions**

Outstanding     Good     Satisfactory     Marginal

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**8. Management and surveillance of subcontractors**

Outstanding     Good     Satisfactory     Marginal

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**9. Are you aware of any payment problems which may have existed between the contractor and his subcontractors/vendors, etc.?**

Yes                       No

If so, describe.

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**10. Cooperation**

Evaluate the contractor in terms of maintaining a reasonable and cooperative attitude throughout contract performance with customer, subcontractors, other contractors

Outstanding     Good     Satisfactory     Marginal

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**11. Customer satisfaction**

Evaluate the end user's overall satisfaction with contractor's service in terms of providing high quality services in a timely, cost effective manner.

Outstanding     Good     Satisfactory     Marginal

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**1. What was the contractor's greatest strength?**

**2. What was the contractor's greatest weakness?**

**3. Would you select this contractor again?**

**4. Are there any other relevant comments?**

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I hereby certify that the information in this form is accurate and complete to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date