

No. \_\_\_\_\_

Dated \_\_\_\_\_

## Supplier/ Vendor Evaluation Form

### **1. General:**

- i. Name of Supplier/ Vendor: \_\_\_\_\_
- ii. Address of Supplier/ Vendor: \_\_\_\_\_
- iii. Contact Person: \_\_\_\_\_
- iv. Phone No. \_\_\_\_\_
- v. Fax No. \_\_\_\_\_
- vi. Email: \_\_\_\_\_
- vii. Web Address: \_\_\_\_\_
- viii. Year of Establishment: \_\_\_\_\_
- ix. Facility Size: \_\_\_\_\_
- x. Category: 

<i>Materials</i>
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<i>Services</i>
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### **2. Manufacturing Facility/ Process Facility**

- i. Does the supplier/ vendor has adequate machinery and equipment to supply materials/ services? 

<i>Yes</i>
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<i>No</i>
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- ii. Describe available machinery/ equipment:
- | <i>Sr. #</i> | <i>Description</i> | <i>No.</i> | <i>State of Maintenance</i> |
|--------------|--------------------|------------|-----------------------------|
| <b>a</b>     |                    |            |                             |
| <b>b</b>     |                    |            |                             |
| <b>c</b>     |                    |            |                             |
| <b>d</b>     |                    |            |                             |
| <b>e</b>     |                    |            |                             |

- iii. Does the supplier/ vendor maintain a maintenance schedule?

<i>Yes</i>
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<i>No</i>
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- iv. Does the supplier/ vendor has adequate knowledge of the manufacturing processes carried out by him?

<i>Yes</i>
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<i>No</i>
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- v. Does the supplier/ vendor maintain technical files on the manufacturing processes carried out by them?
- vi. Are tools, dies, jigs reconfirmed for compliance with manufacturing specifications after prescribed intervals?

### **3. Raw Material & Process Consumables Procurement**

- i. Are raw materials and process consumables are tested/ certified at the time of procurement as per required specifications?
- ii. Is record of raw materials and process consumables maintained?

### **4. Workmanship, Training, etc.**

- i. Are employees recruited on the basis of a defined job description?
- ii. a. Are employees provided with any training to perform a specified job?
- b. If the answer is yes, what type of training?
- Outside  
Training*

*In-house  
Training*

*On job  
Training*

*Apprenticeship*
- iii. Are employees properly briefed about the manufacturing processes to be carried out by them?
- iv. Are the craftsmanship/ workmanship of employees satisfactory?

### **5. Shop Floor Management**

- i. Is the working area designed according to process flow?
- ii. Are work stations designed to facilitate the process flow and manufacturing requirements?
- iii. Please indicate the sufficiency of the following:
- |                                |                                  |                                 |
|--------------------------------|----------------------------------|---------------------------------|
| a. Space for each work station | <input type="text" value="Yes"/> | <input type="text" value="No"/> |
| b. Lighting arrangements       | <input type="text" value="Yes"/> | <input type="text" value="No"/> |
| c. Air ventilation             | <input type="text" value="Yes"/> | <input type="text" value="No"/> |
| d. Dust collection             | <input type="text" value="Yes"/> | <input type="text" value="No"/> |

- e. Cleanliness ☐ Yes ☐ No
- f. Arrangement of tools ☐ Yes ☐ No
- iv. Please indicate the sufficiency of the following:
- a. Temperature control ☐ Yes ☐ No
- b. Chemical hazard control ☐ Yes ☐ No
- c. Electricity hazard control ☐ Yes ☐ No
- v. Do they equip workers with protective equipment appropriate to the work they do? ☐ Yes ☐ No
- vi. Do they have written working instructions for each machine or tool? ☐ Yes ☐ No
- How they make sure that workers understand those instructions? \_\_\_\_\_
- \_\_\_\_\_
- vii. Is machinery provided with adequate safety guards? ☐ Yes ☐ No
- viii. Do they have written procedures for storage, use and disposal of chemicals in a language that workers understand? ☐ Yes ☐ No

## **6. Quality Management System:**

- i. Do they have Quality Manual covering Quality Policy, Quality Objectives and Standard Operating Procedures (SOPs)? ☐ Yes ☐ No
- If answer is yes, which certification do they have? \_\_\_\_\_
- (Obtain copy of certificate for record)
- ii. Is Quality Policy displayed at proper places? ☐ Yes ☐ No

## **7. Suppliers/ Sub-Contractors:**

- i. Do they have an approved list of material/ service suppliers? ☐ Yes ☐ No
- ii. Do they have any record demonstrating that the sub-contractors have monitored the working and environmental conditions meeting relevant standards? ☐ Yes ☐ No

## 8. Employment:

- i. What is the employment procedure (i.e. the final recruiting authority etc.)?  
\_\_\_\_\_  
\_\_\_\_\_
- ii. Do they have a signed copy of contract of employment with each worker? ☐ Yes ☐ No
- iii. Are workers informed about their legal rights as employees? ☐ Yes ☐ No
- If answer is yes, by which method they are informed? \_\_\_\_\_  
\_\_\_\_\_
- iv. Do they hold workers' original identification documents? ☐ Yes ☐ No
- v. Does management require medical examination as a condition for employment? ☐ Yes ☐ No
- If yes, what kind of examination it requires? \_\_\_\_\_  
\_\_\_\_\_
- vi. Who has access to test results of the examination? \_\_\_\_\_
- vii. What is employee turn over rate? \_\_\_\_\_
- viii. Do they keep an up-to-date list of employees? ☐ Yes ☐ No

## 9. Child Labor:

- i. Do they have a policy on Child labor? ☐ Yes ☐ No
- ii. What is the legal minimum working age? \_\_\_\_\_
- iii. What is the minimum working age in production facility? \_\_\_\_\_
- iv. Do they possess evidence of the date of birth of each worker? ☐ Yes ☐ No
- If yes, which kind of evidence do they hold? \_\_\_\_\_
- v. Do they keep a list of workers under the age of 18? ☐ Yes ☐ No
- vi. Do workers under the age of 18 operate machines? ☐ Yes ☐ No
- vii. Do workers under the age of 18 work overtime or at night? ☐ Yes ☐ No
- viii. Are workers under the age of 18 in contact with chemicals? ☐ Yes ☐ No

- ix. Do workers under the age of 18 receive regular medical examination? ☐ Yes ☐ No

## **10. Working Hours, Wages & Accommodation:**

- i. What is the standard working hours (excluding overtime) in a week? \_\_\_\_\_
- ii. How many shifts per day does your plant normally work? \_\_\_\_\_
- iii. How many hours of overtime per week? \_\_\_\_\_
- iv. What is the maximum number of hours that employees work in a week? \_\_\_\_\_
- v. How many days off do workers have per week? \_\_\_\_\_
- vi. Do they keep records of the hours worked by each worker every week? ☐ Yes ☐ No
- vii. Please specify system of payment?
- ☐ Piece Rate ☐ Hourly ☐ Per month
- viii. How often do workers get paid (pay period)? \_\_\_\_\_
- ix. Do workers receive paid sick leave and paid annual leave? ☐ Yes ☐ No
- x. Do they provide accommodation for workers? ☐ Yes ☐ No
- xi. Is drinking water available to workers during work hours? ☐ Yes ☐ No

## **11. Disciplinary Procedures:**

- i. Do they have a policy of disciplinary actions? ☐ Yes ☐ No
- ii. Are all the workers informed about the company's disciplinary procedures? ☐ Yes ☐ No
- If yes, which methods do they use to ensure that all workers are informed about the policy and understand the disciplinary procedures? \_\_\_\_\_
- iii. Do they keep a log/ record of all disciplinary actions? ☐ Yes ☐ No

## **12. Health and Safety:**

- i. Do they have a policy on health and safety? ☐ Yes ☐ No
- ii. Do they carry out health and safety risk assessments? ☐ Yes ☐ No

- iii. Have they developed plans for continual improvement based on risk assessments and accident logs?
- iv. Do they have a fire alarm that can be heard in all areas of the production site?    
If yes, is the alarm regularly tested?
- v. Is the workplace provided with emergency exits?
- vi. How often do they check their fire fighting equipment? \_\_\_\_\_
- vii. May workers access first aid equipment in the workplace during all shifts?
- viii. Are medically competent personnel within reach if an accident occurs?

**13.Financial Strength:**

- i. Is the supplier/ vendor financially strong enough to manage a secure supply chain?
  - ii. Does the supplier/ vendor maintain a bank account and accept payments through bank transfer?
  - iii. Does the supplier/ vendor in a position to extend supplies on credit?
- If the answer is Yes, for what period? \_\_\_\_\_

**14.Comments and General Observations:**

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**15.Evaluation done by:**

- i. Procurement Manager: Name \_\_\_\_\_ Signature \_\_\_\_\_
- ii. Production Manager: Name \_\_\_\_\_ Signature \_\_\_\_\_
- iii. Quality Manager: Name \_\_\_\_\_ Signature \_\_\_\_\_

**16.Approved as Supplier by:**

CEO: Name \_\_\_\_\_ Signature \_\_\_\_\_  
Dated \_\_\_\_\_

## **Instructions:**

1. This evaluation form is to be used to approve suppliers in compliance with quality management system.
2. The evaluation team may consist of any or all of procurement manager, production manager and quality manager depending upon the nature of material/ service to be procured.
3. Once approved by the management, the supplier/ vendor should be included in approved list of suppliers as required to be maintained under quality management system.
4. A complete check is to be performed each year at the beginning of each calendar year.
5. Copies of evaluation and approval would remain available with procurement manager, quality manager and accounts department. However, permanent record shall be kept by the quality manager.