

Vendor Evaluation Form Template Word

Vendor Details

Vendor Name: _____

Business Name: _____

Business Address: _____

Contact Person: _____

Email: _____ Phone Number: _____

Service/Product Provided

Category of Service: _____

Contract Duration: _____

Vendor Performance Assessment

Evaluation Criteria	1	2	3	4	5
Product/Service Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Delivery Timeliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pricing & Cost Efficiency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability & Consistency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Response Time to Issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments & Recommendations

Would you recommend this vendor for future contracts? Yes No

Additional Comments: _____

Evaluator Name: _____

Evaluator Signature: _____ **Date:** _____