**New Product Evaluation Form**

**General Information**

* **Product Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Category: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Target Audience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Testing Period: //\_\_\_\_ to //\_\_\_\_**

**Product Features & Performance**

* **Ease of Use: ☐ Difficult ☐ Moderate ☐ Easy**
* **Quality: ☐ Poor ☐ Average ☐ Good ☐ Excellent**
* **Innovation: ☐ Outdated ☐ Competitive ☐ Cutting-Edge**
* **Value for Money: ☐ Not Worth ☐ Fair ☐ Worth It**

**Final Assessment**

* **Would you suggest improvements? ☐ Yes ☐ No**
* **Additional Comments:**

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