Past Performance Questionnaire

DLA Troop Support Past Performance Questionnaire

Your willingness to complete the following questionnaire is appreciated. The information that you provide will be used in the awarding of federal contracts. Therefore, it is important that your information be as factual, accurate and complete as possible to preclude the need for follow-up by the evaluators. Request that the completed questionnaire is returned via e-mail to Matthew.1.Miller@dla.mil and Felicia.London@dla.mil Thank you.

Contract Information:

Evaluator's Name & Agency/Company _____

Evaluator's Phone Number _____

Evaluator's E-mail Address _____

Contract Number _____

Contractor's Name _____

Contractor's Address _____

Contractor's CAGE Code, if applicable _____

Contract Award Date _____

Contract Annual Dollar Value _____

Contract Term (Start date and End date) _____

Description of Supplies/Services Provided _____

_____

Contract Performance

Please circle, underline, or highlight in bold, one of the numbers for each question using the most appropriate scale description:

Excellent	**Very Good**	**Acceptable**	**Poor**		**Unacceptable**	**N/A**
No Problems	**Rare Problems**	**Occasional Problems**	**Frequent Problems**		**Daily Problems**	**N/A**
5	**4**	**3**	**2**		**1**	

1. Quality of products and service	5	4	3	2	1	N/A
2. Schedule (e.g., fill rates/timeliness of delivery)	5	4	3	2	1	N/A
3. Cost Control	5	4	3	2	1	N/A
4. Management (e.g., communication/responsiveness)	5	4	3	2	1	N/A
Overall Performance	**5**	**4**	**3**	**2**	**1**	**N/A**

REMARKS (instances of problems or instances of exceptional performance):

_____

_____N

ote: N/A means Not Applicable.