

PAST PERFORMANCE QUESTIONNAIRE

PART 1 – TO BE COMPLETED BY OFFEROR/CONTRACTOR

1. Contractor Name: _____
2. Referenced Contract Number/Description: _____
3. Award Date/Completion Date: _____
4. Approximate Value: _____

PART 2 – TO BE COMPLETED BY REFERENCE

1. Reference Name: _____
2. Address: _____
3. Telephone: _____
4. Email: _____
5. Please complete the following questionnaire and return it to the attention of Patrick Groves at Network Contract Office 4, 323 North Shore Drive Suite 400, Pittsburgh, PA 15212; or patrick.groves@va.gov. You may use the following descriptions as guidelines when providing your evaluation:

ADJECTIVAL RATING	DESCRIPTION
EXCELLENT	Contractor conveyed complete understanding of our requirements. Exceeded all performance objectives. No deficiencies.
GOOD	Contractor conveyed understanding of our requirements. Met or exceeded all performance objectives. No deficiencies.
FAIR	Contractor conveyed some understanding of our requirements. Did not meet all performance objectives. Deficiencies required minimal corrections.
POOR	Contractor conveyed little understanding of our requirements. Did not meet all performance objectives. Deficiencies required major corrections.
UNSATISFACTORY	Contractor conveyed no understanding of our requirements. Did not meet any performance objectives. Deficiencies not corrected.

6. Did the contractor utilize quality control process that ensured conformance to quality and scope requirements?

E	G	F	P	U	N/A
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REMARKS:

7. Did the contractor meet timeliness goals in performing the contract? Did the contractor provide timely notices of delays and schedule revisions?

E	G	F	P	U	N/A
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REMARKS:

8. Did the contractor provide complete and timely background investigation requests, credentialing and privileging requests, and VetPro certification requests?

E	G	F	P	U	N/A
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REMARKS:

9. Did the contractor provide qualified, competent, and adequate personnel capable of meeting contract requirements throughout contract performance?

E	G	F	P	U	N/A
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REMARKS:

10. Did the contractor work well independent of Government oversight, guidance, and assistance?

E	G	F	P	U	N/A
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REMARKS:

11. Did the contractor maintain a good working relationship with agency contracting, technical, and management personnel?

E	G	F	P	U	N/A
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REMARKS:

12. Did the contractor manage and coordinate their subcontractors well?

E	G	F	P	U	N/A
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REMARKS:

13. Did the contractor remain cooperative, flexible, and reasonable when faced with short-notice changes?

E	G	F	P	U	N/A
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REMARKS:

14. Did the contractor respond timely and effectively to resolve technical problems? Did the contractor's management personnel have sufficient authority to make decisions or take actions during contract performance?

E	G	F	P	U	N/A
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REMARKS:

15. How would you rate the contractor's performance overall?

E	G	F	P	U	N/A
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REMARKS:

16. Please describe the contractor's top *strengths* demonstrated during contract performance.

REMARKS:

17. Please describe the contractor's top *weaknesses* demonstrated during contract performance.

REMARKS:

18. Please provide any additional information you feel is important.

REMARKS:

19. Thank you for your assistance. Please return this questionnaire to the attention of Patrick Groves at Network Contract Office 4, 323 North Shore Drive Suite 400, Pittsburgh, PA 15212; or patrick.groves@va.gov.