

**PERFORMANCE QUESTIONNAIRE**

Your assistance is requested in support of a source selection.

Please complete this Questionnaire and email, Mail or send by facsimile [FAX 202-632-5824] to:

Department of Veterans Affairs  
National Cemetery Administration  
Attn: Tiffany Thornton  
425 I Street NW, 5<sup>th</sup> Floor  
Washington D.E. 20001

Desired Response Date: **August 22, 2013**

**Email: *tiffany.thornton@va.gov***

When complete, the information on this form is SOURCE SELECTION SENSITIVE INFORMATION (41 U.S.C. 423) and shall be protected accordingly.

**TO BE COMPLETED BY OFFEROR**

1. CONTRACTOR NAME & ADDRESS:	2. CONTRACT NO.:
	3. CONTRACT INITIATION DATE:
	4. COMPLETION DATE:
	5. CONTRACT VALUE (with options): \$
	6. TYPE OF CONTRACT:
7. DESCRIPTION OF CONTRACT REQUIREMENTS:	

Please add a continuation page if additional space necessary.

**TO BE COMPLETED BY EVALUATING ORGANIZATION REPRESENTATIVE**

8. EVALUATION: a. EVALUATOR'S NAME, POSITION (Project Manager/ COR/ Other) AND ORGANIZATION:

b. EVALUATOR'S PHONE NUMBER:

c. MONTHS PERFORMANCE MONITORED BY EVALUATOR:

Please circle the response code for each topic (A – G) that best reflects your experience with this contractor.

**O** = Outstanding                      **A** = Adequate                      **P** = Poor  
**E** = Excellent                              **M** = Marginal                              **N/O** = Not Observed

**A. Quality of Products and Services** - Assess the contractor's conformance to contract requirements, specifications, and standards of good workmanship (e.g., technical, professional, environmental, or safety and health standards).

**O                      E                      A                      M                      P                      N/O**

**B. Performance** – Assess the contractor's performance as the General Contractor or Architect/Engineer (as appropriate) for the project.

**O                      E                      A                      M                      P                      N/O**

**C. Schedule** – Assess the timeliness of contractor against the schedule of activities.

**O                      E                      A                      M                      P                      N/O**

**D. Technical Requirements** – Assess the contractor's ability to fulfill the technical requirements of the contract.

**O                      E                      A                      M                      P                      N/O**

**E. Cost Control** – Assess the contractor's ability to manage the contract budget and control costs.

**O                      E                      A                      M                      P                      N/O**

**F. Customer Satisfaction** – Assess the contractor's responsiveness to customer concerns and "user friendliness".

**O                      E                      A                      M                      P                      N/O**

**G. Overall Assessment.**

**O                      E                      A                      M                      P                      N/O**

If an Award Fee contract, what was the average Award Fee % earned?