# Vendor Performance Form

Please provide feedback on the following company based on your experience with them as a vendor. Your feedback is an important part of our review and selection process. To report major vendor problems, please use the Vendor Complaint Form so that the Purchasing Department may assist you in resolving those problems.

| | |
|---|---|
| Vendor Name: | Sales Representative: |
| Was there a Specific Bid or Contract for this purchase? | P.O. #: |
| Today's Date: | Campus or Department: |
| Campus/Dept. Contact Name: | Campus/Dept. Contact Phone #: |

| | Yes | No | N/A |
|---|---|---|---|
| **Customer Service** | | | |
| 1. Vendor representative has good product knowledge | | | |
| 2. Vendor's staff was proactive in handling issues | | | |
| 3. Customer experienced outstanding service | | | |
| 4. Phone calls or e-mail was returned promptly | | | |
| **Delivery** | | | |
| 5. Satisfied with order completion timeliness | | | |
| 6. Satisfied that back-orders were completed promptly | | | |
| **Sales and Support Service Area** | | | |
| 7. Satisfaction with staff | | | |
| 8. Satisfaction with your ability to contact company | | | |
| 9. Satisfaction with problem resolution | | | |
| 10. Satisfaction with warranty or replacements | | | |

If no, please state expectation that was not met: _____

_____

## Overall Satisfaction

11. Provide a numerical rank of your recommendation regarding this vendor/dealer (a high evaluation is a recommendation to continue working with this vendor) on a scale of 1 to 5 with 5 meaning very satisfied to 1 meaning very dissatisfied: _____

12.Other comments about your experience with this vendor (optional):_____

_____

Please fax, email or mail to:

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