



**Attachment U-Performance Evaluation Form**

RFP Title: Support and Maintenance for EDITPS and MMIS II RFP #DHMHOPASS 15-14260

Name of individual being evaluated: (insert name)

(The Contractor shall submit one Performance Evaluation Form for each employee as required)

Evaluation Month & Year: \_\_\_\_\_

Role (RFP Section <<3, >>X): \_\_\_\_\_

Labor Category: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Contractor Contact: \_\_\_\_\_

Contract Monitor: \_\_\_\_\_

Department or Agency: \_\_\_\_\_

**PROJECT PERSONNEL PERFORMANCE RATING\***

The information below shall be completed by the Contract Monitor or Designee and returned to the Contractor

Performance Area	Satisfactory	Unsatisfactory
Attendance and Timeliness		
Work Productivity		
Work Quality		
Teamwork		
Communication		
Customer Service		

\*Project Personnel must maintain a "Satisfactory" rating for each performance area. The Contractor shall take action to address any unsatisfactory rating. At the Contract Monitor's discretion, employee performance may be rejected and payment withheld pending employee performance mitigation or employee substitution.

Employee performance overall is accepted.

Employee performance overall is rejected (for reasons indicated below).

REASON(S) FOR UNSATISFACTORY EMPLOYEE PERFORMANCE RATING/S:

OTHER COMMENTS:

OTHER COMMENTS:

Signature of Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Required)

Signature of Contractor: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Required)