UNIVERSITY OF LOUISIANA AT LAFAYETTE
EVALUATION OF CONTRACT PERFORMANCE

Registration No: _______________________

Contractor: __________________________

Monitor: ____________________________

Project: ______________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Amount: $ ___________

Actual amount invoiced for total payment: $ ___________

Contract begin and end date: begin ____________ end ____________

Actual begin and end date: begin ____________ end ____________

Contract amendment/Modification number: _______________

Reasons:

Description of service:

Deliverables:

Were deliverables produced according to contract schedule? Yes_______ No_______
If not, please explain:

Did product(s) meet expected standards? Yes_______ No_______
If not, please explain:

Were problems encountered with service schedule or delivery? Yes_______ No_______
If yes, please explain:

Were there weaknesses encountered in contractor’s performance? Yes_______ No_______
If yes, please explain:

Were there any strengths encountered in contractor’s performance? Yes_______ No_______
If yes, please explain:

Would you hire this contractor again? Yes_______ No_______
If not, please explain:

_________________________________________       _____________________________
Monitor                   Date