

PAST PERFORMANCE EVALUATION QUESTIONNAIRE FORM

NOTE: If past performance information is available in CPARS, this form shall not be filled out.

PART I. (To be completed by the Offeror)

Project Identification Information:	
Contractor Name	
Contract No.	
Subcontract No. (if applicable)	
Program/Project Title	
Client Reference/ Rater Information:	
Rater Name	
Title	
Agency/Company/Organization	
Phone No.	
Email	

PART II. RATINGS (To be completed by the client reference)

The following questions pertain to the contractor's record of past (within the past five years) and current performance. The information that you provide will be used in the awarding of a federal contract. Therefore, it is important that our information be as factual and accurate as possible.

For each of the five (5) criteria listed below, the rater must choose one (1) Adjectival Rating by checking the box, as applicable. At a minimum, for any rating that is checked Marginal or Unsatisfactory, please submit additional comments to substantiate the rating. For any rating that is checked Not Applicable, please explain why it does not apply.

Adjectival Ratings

Exceptional: Performance meets contractual requirements and exceeds many to the Government's benefit. The contractual performance of the element or sub-element being evaluated was accomplished with few minor problems for which corrective actions taken by the contractor were highly effective.

Very Good: Performance meets contractual requirements and exceeds many requirements that benefit the end user. Work was accomplished with few, if any, minor problems for which corrective actions taken by the contractor were highly effective.

Good: Performance meets contractual requirements and exceeds some to the Government's benefit. The contractual performance of the element or sub-element being evaluated was accomplished with some minor problems for which corrective actions taken by the contractor were effective.

ATTACHMENT# 08

Unsatisfactory: Performance does not meet most contractual requirements and recovery is not likely in a timely manner. The contractual performance of the element or sub-element contains a serious problem(s) for which the contractor's corrective actions appear or were ineffective.

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(Explanation must be provided in Comments field below for Marginal or Unsatisfactory rating)

Comments:

3. COST CONTROL

- ☐ Exceptional
- ☐ Very Good
- ☐ Good
- ☐ Satisfactory
- ☐ Marginal
- ☐ Unsatisfactory
- ☐ Not Applicable

(Explanation must be provided in Comments field below for Marginal or Unsatisfactory rating)

Comments:

4. BUSINESS RELATIONS

- ☐ Exceptional
- ☐ Very Good
- ☐ Good
- ☐ Satisfactory
- ☐ Marginal
- ☐ Unsatisfactory
- ☐ Not Applicable

(Explanation must be provided in Comments field below for Marginal or Unsatisfactory rating)

Comments:

5. MANAGEMENT OF KEY PERSONNEL

- ☐ Exceptional
- ☐ Very Good
- ☐ Good
- ☐ Satisfactory
- ☐ Marginal
- ☐ Unsatisfactory
- ☐ Not Applicable

(Explanation must be provided in Comments field below for Marginal or Unsatisfactory rating)

Comments:

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Signature below by a Contracting Officer, Contracting Officer's Representative, Contracting Officer's Technical Representative, or Corporate Official for the ordering activity constitutes acceptance of the above project information to be accurate as ordered and received by the listed entity.

Signature of Rater/Date: (Rating must be provided by a Contracting Officer, Contracting Officer's Representative, Contracting Officer's Technical Representative, or other Corporate Officer with cognizance over the project for the ordering activity)	
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PART IV. RETURN INFORMATION

Please return this completed Questionnaire to the **ASPS Contracting Officer**
ocpo.asps.requirement@irs.gov.

Thank you for your assistance!