Te	exas Woman	's University Ven	dor/C	ontractor Perfo	rmance F	orm			
Instructions: This form is required to be prepared by the Project Manager and then emailed to Procurement and Contract Services at <a href="mailto:twucontracts@twu.edu">twucontracts@twu.edu</a>									
What type: Professional Services Construction Service Consultant Commodity									
	1	Part I – GENERA	AL CON	TRACT DATA					
Contract No. (not project n	umber)	Contract Date		Today's Date					
To: Vendor Name, Address, Phone, VID Number				From: Department Contact Name, phone and email address					
Description and location of work:			I						
		FISC	AL DAT	A					
Amount of Original Contract:				Liquidated Damages Assessed (if any):			Net Amount Paid to Contractor:		
	1	SIGNIFIC							
Date of Award:	Original Contra	act Completion Date:	Revise	sed Contract Completion Date: Date Work Accepted:					
Type and Extent of Subcontractin		– PERFORMANCE	EVALU	ATION OF CONT	RACT				
PERFORMANCE ELEMENTS		OUTSTA	NDING	SATISFACTORY		LESS THAN UNACCEPTAB SATISFACTORY			
Quality of Work									
Timely Performance									
Effectiveness of Management									
Compliance with Labor Standards	5								
Compliance with Safety Standard	S								
Overall Evaluation									
Detailed Explanation (please be s	pecific; attach ac	Iditional sheets if requ	ired):	Titlo			Date		
Completed by: Signature				Title			Date:		
Department Director/Associate Director Signature				Contracting Director Signature					
For less than satisfactory evaluat corre		able evaluations, a cop Contractor/Vendor sha					orting documentation of		