

**Return completed form to:
Purchasing Department
Rice Building, 4th Floor**

Vendor Name	Vendor ID #
Requesting Department	Contact Name
Phone number	Date

For each item listed below, place a check in the box that corresponds to the vendor's level of performance. For example, if timeliness was excellent, place a check in the excellent box for timeliness.

Vendor Satisfaction Survey

	Excellent (5)	Good (4)	Fair (3)	Poor (2)	Unsatisfactory (1)
Quality of Product or Service (20%)					
Timeliness of Performance (15%)					
Cost Control (20%)					
Business Practices (15%)					
Customer Satisfaction (the end user) (10%)					
Past Performance (20%) <i>(Those without past performance, do not rank this section)</i>					

Key terminology to complete survey:

- Quality of product or service – Did the product meet the specifications and needs of the Requesting Department based upon what was requested?
- Timeliness of performance – Was the product or service delivered in a timely manner?
- Cost control – Did the company make efforts to maintain low costs to Rensselaer?
- Business Practices – Did the company act in a fair and ethical manner? Did they maintain compliance with the law?
- Customer Satisfaction – Was the end user satisfied with the product or service?
- Past performance – If the Requesting Department has used this company previously, was the department satisfied with the company's previous performance?