

PAST PERFORMANCE QUESTIONNAIRE

**NASA ADVANCED SUPERCOMPUTING FACILITY N258 ELECTRICAL SUPPLY
RELIABILITY IMPROVEMENT PROJECT PHASE 1B AND PHASE II
NASA AMES RESEARCH CENTER, MOFFETT FIELD, CALIFORNIA**

The Contractor listed in this form is being considered in a source selection by NASA Ames Research Center. We would appreciate it if you would provide us with comments regarding the Contractor's past performance. Your comments are considered Source Selection Sensitive and, therefore, your name as a reference will not be released. In order to maintain the integrity of the source selection process, we respectfully request that you do not divulge the name of the Contractor nor discuss your comments on this questionnaire with any other individuals.

PLEASE RETURN THIS FORM BY MAIL, FAX OR E-MAIL TO:

**NASA Ames Research Center
Attn: AnJennette Rodriguez, Mailstop 213-13
Moffett Field, CA 94035-1000**

**Fax: (650) 604-2593
Email: AnJennette.C.Rodriguez@nasa.gov**

I. Contract Information

A. Name of Company/Division: _____

B. Contract Number: _____

C. Project Title and Location: _____

D. Period of Performance (including options): From: _____ To: _____

E. Original Contract Value and Contract Type: _____

Number of change Proposal(s): _____

Value of each change proposal(s) _____

Reason for each change proposal(s): _____

F. Provide overall Safety and Health injury/illness record.

II. Description of Contract

Briefly describe the services provided under the contract:

During the contract performance being evaluated, this firm was the:

Prime Contractor ____ Subcontractor ____ Team Member ____
 Other (describe) _____

III. General Performance Survey

Use the following ratings to respond to the questions below Please select one rating per statement, using the following definitions. Please provide additional remarks to further explain any rating and in response to the more detailed questions.

Definition of Ratings

Excellent (E)	Of exceptional merit; exemplary performance in a timely, efficient, and economical manner; very minor (if any) deficiencies with no adverse effect on overall performance.
Very Good (VG)	Very effective performance, fully responsive to contract requirements; contract requirements accomplished in a timely, efficient, and economical manner for the most part; only minor deficiencies.
Good (G)	Effective performance; fully responsive to contract requirements; reportable deficiencies, but with little identifiable effect on overall performance.
Satisfactory (S)	Meets or slightly exceeds minimum acceptable standards; adequate results; reportable deficiencies with identifiable, but not substantial, effects on overall performance.
Poor / Unsatisfactory (P/U)	Does not meet minimum acceptable standards in one or more areas, which adversely affect overall performance.

NO	PERFORMANCE QUESTIONS	RATING (Please Circle)				
		E	VG	G	S	P/U
	MANAGEMENT AND TECHNICAL PERFORMANCE					
1.	Ability to deliver the project that meets or exceeds performance requirements within cost estimates and schedule.	E	VG	G	S	P/U
2.	Ability to effectively manage and control subcontractor performance.	E	VG	G	S	P/U
3.	Overall responsiveness to communicating and interfacing with the Government.	E	VG	G	S	P/U
4.	Effectiveness of jobsite supervision.	E	VG	G	S	P/U
5.	Compliance with labor standards.	E	VG	G	S	P/U
6.	Effectiveness of contract closeouts and payment of	E	VG	G	S	P/U

	subcontractors.					
7.	Adherence of Quality Control (QC) Plan.	E	VG	G	S	P/U
	SAFETY & SECURITY					
8.	Adequacy of Safety Plan and implementation of plan.	E	VG	G	S	P/U
9.	Adherence to established security procedures.	E	VG	G	S	P/U
10.	Overall Safety and Health injury/illness record	E	VG	G	S	P/U

Please comment on particularly strong/weak points of Contractor's performance (technical, schedule, and/or cost):

Overall Contract Performance Rating (circle one):

Excellent Very Good Good Satisfactory Poor/Unsatisfactory

Would you select this Contractor again? () Yes () No

Please add any other comments you may feel are pertinent:

IV. Evaluator Information

Name: _____
 Title: _____
 Agency/Company: _____
 Address: _____
 Email Address: _____
 Phone: _____ Date Questionnaire Completed: _____
 Role in Program/Contract: _____
 Length of Involvement in this Program/ Contract: _____

 Rater's Signature

 Date