

Exhibit C

PAST PERFORMANCE QUESTIONNAIRE Page #1.

Your assistance is requested in support of a source selection.

Please complete this Questionnaire and forward via email to:

Response Date: _____

When complete, the information on this form is SOURCE SELECTION SENSITIVE INFORMATION (41 U.S.C. 423) and shall be protected accordingly.

TO BE COMPLETED BY OFFEROR

1. CONTRACTOR NAME & ADDRESS	2. CONTRACT NO.:
	3. CONTRACT INITIATION DATE:
	4. COMPLETION DATE:
	5. CONTRACT VALUE (with options):
7. REFERENCE #:	6. TYPE OF CONTRACT:

8. DESCRIPTION OF CONTRACT REQUIREMENTS:

Please add continuation pages if additional space is needed.

TO BE COMPLETED BY EVALUATING ORGANIZATION'S REPRESENTATIVE

9. EVALUATION: a. EVALUATOR'S NAME, POSITION (Project Manager/ COR/ Other) AND ORGANIZATION:
 b. EVALUATOR'S PHONE NUMBER: c. MONTHS PERFORMANCE MONITORED BY EVALUATOR:

Please underline the response code for each topic (A – G) that best reflects your experience with this contractor.

EX = Exceptional | **VG** = Very Good | **S** = Satisfactory | **MG** = Marginal | **US** = Unsatisfactory | **N/O** = Not Observed

A. Technical understanding and technical capability as demonstrated by the size, scope, complexity and results achieved in the completion of actual contracts/task orders similar to those expected under this contract.

EX VG S MG US N/O

B. Innovative approaches developed and insightful recommendations made by the contractor to address similar efforts and technical challenges.

EX VG S MG US N/O

C. Continuity of service provided including the degree of staff turnover and the ability to fill vacant positions in a timely manner.

EX VG S MG US N/O

D. Ability to deliver the required services at an agreed- to price or cost.

EX VG S MG US N/O

E. Ability to manage subcontractor responsibilities.

EX VG S MG US N/O

F. Ability to cooperate with the Government Technical Representatives as well as other vendors and contractors.

EX VG S MG US N/O

G. Overall Assessment.

EX VG S MG US N/O

