

**KENTUCKY TRANSPORTATION CABINET
DIVISION OF ENVIRONMENTAL ANALYSIS
CONSULTANT PERFORMANCE EVALUATION**

NAME & ADDRESS OF CONSULTANT: Consultant Name Attn: Mr. / Ms. Address City, State Zip				PROJECT IDENTIFICATION: Project Name Item No. XX-XXXX.XX County: Type Work:						
CONTRACT DATA										
Contract No: PON2 1234567890		Type: Lump Sum/Cost Plus/Design-Environmental		Letter Agreement:						
Amount of Original Contract: \$		Total Amount of Modifications: \$		Total Amount of Contract: \$						
Notice to Proceed Date:		Contracted Completion Date (Incl. Extensions):		Actual Completion Date:						
NAME OF SUBCONSULTANTS AND TYPE OF WORK:										
RATING CATEGORIES			RATINGS							
			4	3	2	1	0*	Wgt	Tot	
A. PROJECT MANAGEMENT	MANAGEMENT	Leadership/Initiative	Provided Project Leadership; Initiative was excellent <input type="checkbox"/> 4	Minimal Guidance Required, initiative was good <input type="checkbox"/>	Frequent Guidance Required; Initiative was fair <input type="checkbox"/>	Continual Guidance Required; Initiative poor <input type="checkbox"/>		3	12	
	PROJECT MANAGER	Organization/Preparedness & Competance	Well Organized, No Oversights <input type="checkbox"/> 4	Minor Oversights <input type="checkbox"/>	Frequent Oversights <input type="checkbox"/>	Major Oversights <input type="checkbox"/>		2	8	
	COORDINATION/ TIMELINESS		Responsiveness	All Requests Quickly Resolved <input type="checkbox"/> 4	Most Requests Resolved in Reasonable Time <input type="checkbox"/>	Some Requests Resolved in Reasonable Time <input type="checkbox"/>	Few Requests Resolved in Reasonable Time <input type="checkbox"/>		3	12
			Schedule¹	All Completion Dates Met <input type="checkbox"/> 4	Most Completion Dates Met <input type="checkbox"/>	Few Completion Dates Met <input type="checkbox"/>	No Completion Dates Met <input type="checkbox"/>		3	12
			Response to Recommendations	Received/ Responded Well to All Recommendations <input type="checkbox"/> 4	Responded Favorably to Most Recommendations <input type="checkbox"/>	Responded Favorably to Some Recommendations <input type="checkbox"/>	Poor Response to Recommendations <input type="checkbox"/>		2	8
B. QUALITY AND ACCURACY OF WORK	APPLICATIONS, DOCUMENTS OR OTHER PRODUCTS		Presentation/Appearance	Excellent <input type="checkbox"/> 4	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	1	4	
			Accuracy	Zero to Minimal Errors <input type="checkbox"/> 4	Few Errors <input type="checkbox"/>	Several Errors <input type="checkbox"/>	Many Errors <input type="checkbox"/>		4	16
			Analysis/Conclusions Recommendations	Appropriate, Sound, Logical Conclusions <input type="checkbox"/> 4	Acceptable Conclusions <input type="checkbox"/>	Some Results Unsupported or Unacceptable <input type="checkbox"/>	Most Results Unsupported and Unacceptable <input type="checkbox"/>		5	20
			Number of Revisions and Submittals	Excellent Initial Document; Minimal or no Revisions <input type="checkbox"/> 4	Good Initial Document; Few Revisions <input type="checkbox"/>	Fair Initial Document; Few Major Revisions and Multiple Submittals Required <input type="checkbox"/>	Poor Initial Document; Multiple Submissions Required <input type="checkbox"/>		2	8
GENERAL RATING SCALE			RATING OF POSSIBLE 100 POINTS → 100							
Poor (1-69)		Fair (70-79)		Good (80-89)		Excellent (90-100)				
(Name & Title)			General Rating →			EXCELLENT				
Rated By:			Signature:			Date:				
Approved by: David Waldner			Signature:			Date:				
Comments:										

* Zero rating indicates extreme dissatisfaction with the performance in this category

¹ 4=100% of completion dates met., 3=75.99-99.9%, 2=50-74.9%, 0-49.9%