

Vendor Assessment Summary

Vendor Name: [Vendor Name]

Assessment Date: [Assessment Date]

Conducted by: [Your Name/Company]

1. Vendor Information

Contact Person: [Contact Person]

Email: [Email Address]

Phone: [Phone Number]

2. Assessment Criteria

- Quality of Products/Services
- Pricing Structure
- Delivery Timeliness
- Customer Support
- Compliance and Certifications

3. Assessment Results

Criteria	Rating (1-5)	Comments
Quality of Products/Services	[Rating]	[Comments]
Pricing Structure	[Rating]	[Comments]
Delivery Timeliness	[Rating]	[Comments]
Customer Support	[Rating]	[Comments]
Compliance and Certifications	[Rating]	[Comments]

4. Overall Assessment

Overall Rating: [Overall Rating]

Summary: [Brief Summary of Findings]

5. Recommendations

[Recommendations for Future Engagement]

Prepared by: [Your Name]