

NORTHWESTERN STATE UNIVERSITY

PERFORMANCE EVALUATION

For Personal, Professional, Consulting or Social Service Contract

Agency Name: Northwestern State University			
Budget Unit Name:			
Contractor Name:			
Contract Amount:		Actual Amount Paid:	
Contract begin date:		End date:	
Description of Services: (What were the services being provided?)			
Deliverable Products:			
(What were final products?)			
(Were they delivered on time?)			
(Were they usable? If so, how? If not, why not?)			
Problems encountered:			
Overall Performance (check one)		<input type="checkbox"/>	Satisfactory
		<input type="checkbox"/>	Unsatisfactory

Signature of NSU Project Director responsible for monitoring and final acceptance:	
Print Name:	Signature:
Title:	Date: