



PEER REVIEW EVALUATION FORM

Reviewed Firm _____

Date of Review _____

Team Captain's Name _____

Type of Review _____

On a scale of 5 to 1, please circle the best expression of your feelings on each statement. 5=Strongly Agree, 4=Agree, 3=Undecided, 2=Disagree, 1=Strongly Disagree.

- | | | | | | | |
|----|---|---|---|---|---|---|
| 1. | The reviewer(s) identified and communicated useful major points in the peer review's report, FFC(s), and/or MFC(s) (answer only if one(s) was/were issued). | 5 | 4 | 3 | 2 | 1 |
| 2. | The reviewer(s) provided other helpful suggestions for improving the quality and/or practice development of the firm's practice. | 5 | 4 | 3 | 2 | 1 |
| 3. | The review was carried out in a timely and professional manner. | 5 | 4 | 3 | 2 | 1 |
| 4. | The reviewer(s) showed good judgment in distinguishing between important and unimportant matters. | 5 | 4 | 3 | 2 | 1 |
| 5. | The reviewer(s) is (are) recommended for other firms. | 5 | 4 | 3 | 2 | 1 |
| 6. | The review was worth the money. | 5 | 4 | 3 | 2 | 1 |
| 7. | Overall review rating: _____ superior _____ good _____ average _____ below average. | | | | | |

Comments on the Reviewer: _____

Comments About the Review and/or Program: _____

Signature _____ Title _____ Date _____