

# Vendor Performance Scorecard

## Vendor Information

- Vendor Name: \_\_\_\_\_
- Evaluation Period: \_\_\_\_\_

## Scoring Criteria

Category	Weight (%)	Score (1-5)	Weighted Score	Comments
Product/Service Quality	____%	____	____	Percentage of defect-free deliveries
Delivery Timeliness	____%	____	____	On-time delivery rates
Cost Management	____%	____	____	Consistency in pricing
Customer Service	____%	____	____	Responsiveness and support effectiveness
Communication Efficiency	____%	____	____	Regular and transparent updates
Adaptability	____%	____	____	Handling changes and urgent requests
Feedback Implementation	____%	____	____	Response to previous evaluations

## Overall Performance Summary

- **Achievements:**

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- **Areas Requiring Focus:**

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**Total Weighted Score:** \_\_\_\_\_