

Evaluation Summary Abstract

Project: _____

Project No. (if applicable): _____

TOTAL OVERALL SCORE

| | Evaluator #1 | Evaluator #2 | Evaluator #3 | Subtotals |
|--|--------------|--------------|--------------|-----------|
|--|--------------|--------------|--------------|-----------|

Individual/Firm #1: _____

| | | | | |
|---|-------|-------|-------|-------|
| 1. Experience/Professional Qualifications | _____ | _____ | _____ | _____ |
| 2. Past Performance | _____ | _____ | _____ | _____ |
| 3. Ability to Meet Project Schedule | _____ | _____ | _____ | _____ |
| 4. Other: _____ | _____ | _____ | _____ | _____ |
| 5. Other: _____ | _____ | _____ | _____ | _____ |

Individual/Firm #1 Total: _____

Individual/Firm #2: _____

| | | | | |
|---|-------|-------|-------|-------|
| 1. Experience/Professional Qualifications | _____ | _____ | _____ | _____ |
| 2. Past Performance | _____ | _____ | _____ | _____ |
| 3. Ability to Meet Project Schedule | _____ | _____ | _____ | _____ |
| 4. Other: _____ | _____ | _____ | _____ | _____ |
| 5. Other: _____ | _____ | _____ | _____ | _____ |

Individual/Firm #2 Total: _____

Individual/Firm #3: _____

| | | | | |
|---|-------|-------|-------|-------|
| 1. Experience/Professional Qualifications | _____ | _____ | _____ | _____ |
| 2. Past Performance | _____ | _____ | _____ | _____ |
| 3. Ability to Meet Project Schedule | _____ | _____ | _____ | _____ |
| 4. Other: _____ | _____ | _____ | _____ | _____ |
| 5. Other: _____ | _____ | _____ | _____ | _____ |

Individual/Firm #3 Total: _____

(Attach additional sheets if necessary)

Evaluator Name:

Evaluator Signature:

#1 _____

#2 _____

#3 _____
