

PERFORMANCE EVALUATION

Facility	Contract # (If known)	Date
Person Completing This Form		Email

Please rate the following statements:	Poor	Fair	Satisfied	Very Satisfied
Provide additional information below each statement, if desired.	Not Satisfied	Could improve in some areas	Contractual needs are being met	Exceeds our expectations
Services are being completed in accordance to the contract.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List any item numbers and/or tasks you feel need improvement.				
Rate the overall daily quality of work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What recommendations do you have for us to improve, if needed?				
Janitorial staff exhibit professionalism and good attitude.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please list any incidents that you feel need to be noted, good or bad.				
Rate your experience when communicating with our office staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any suggestions on how our office staff can improve?				
Would you recommend our services in the future?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	UNSURE <input type="checkbox"/>	
If you answered anything other than "YES" to the above question, please provide us with details on what we could do differently to gain your trust back and improve our services to you.				

We are committed to providing you with a quality service and your opinion matters to us. Thank you for taking the time to complete this review and for being one of our valuable customers.

Sincerely,

Quality Control Center

Please send this form back to our office by one of the following methods:

Save and email to: QCC@a1performance.com

Print and Fax to: 360-538-5808

Print and Mail to: A-1 Performance Inc., 620 W. Scott Street, Aberdeen, WA 98520, ATTN: Doug