



Service Provider Name: _____

Customer Evaluation Form

The Certified Professional Grade® Service Provider evaluation form is to be given to the Home/Project Owner, at the time of the contract signing. Home/Project owner; please complete this evaluation when the work is completed. Please rate 1-10.

This form will be reviewed by the Service Provider Referral Evaluation Team. Our goal is to help your service provider improve quality and service offerings, while recognizing those who do excellent work. Thank you for your cooperation.

Project Name (If your home, write "HOME") _____ Home/Project Owner (Your name) _____ Date completed _____

Home (Project) Address _____ City _____ State _____ Zip _____

To have someone contact you, please mark an "X" here - []. Place an "X" in the preferred method of contact box below.

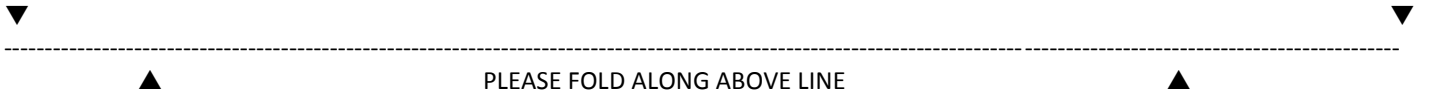
Day Time Phone [] _____ Cell Phone [] _____ Email Address [] _____

- 10 Excellent, perhaps the BEST in the field**
- 9 Extremely satisfied
- 8 Highly satisfied
- 7 Very well done. Above the call of duty
- 6 Above average; good job
- 5 Performs at the level expected (Average)**
- 4 Below average -- with effort could be better
- 3 Deficient and needs to improve
- 2 Severely deficient
- 1 Extremely poor / BAD**

Category	Description	SCORE
PRICE vs. VALUE	Contractor PRICES may vary greatly; however the work they perform may also vary. The VALUE you receive is a combination of Price, quality, warranty, timeliness and convenience. How satisfied were you with the contractor's value? BEST =10	
CHANGES	Occasionally a contractor may sign a contract, begin work and due to unforeseen circumstances, may request a change in the original price quoted. How satisfied were you with the contractor changes? If no changes, SCORE 10	
PERFORMANCE	How well did your service provider perform the contracted work?	
WORKFORCE	How satisfied were you with the cleanliness and politeness of the workforce that did your work?	
ON TIME	How satisfied are you that your service provider showed up, or began work as promised?	
TIMELINESS	How satisfied are you that the service provider was committed to finishing your project as promised?	
PRIORITIES	How satisfied are you that your service provider considered your project a high priority?	
RESPECT	How satisfied are you that the service provider respected your family, employees, home or business?	
COMMUNICATIONS	How satisfied are you that your service provider kept you informed; i.e. giving you at least 24 hour notice of their arrival, informing you of issues, completed work and when work would be done?	
RECOMMENDATION	What is the likelihood you would recommend this service provider to a friend, church or another business owner?	
EVALUATION PRESENTATION	How well did the contractor explain this feedback form and when did you get it? I received this evaluation on: _____ I received my signed contract on: _____	

If you would like to provide written feedback, please add your comments here or email to gmler@aaccmke.org. (414) 462-9450

Thank you.



From



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