

PROFESSIONAL PERFORMANCE SHEET

THE FOLLOWING FORM IS TO BE USED TO RATE THE LEVEL OF SERVICE THAT YOU HAVE PERSONALLY RECEIVED FROM A FELLOW LeTIP MEMBER. THIS FORM IS INTENDED TO HELP FACILITATE COMMUNICATION AND MAINTAIN A LEVEL OF EXCELLENCE WITHIN THE GROUP.

MEMBER WHO PROVIDED THE SERVICE:	
TYPE OF SERVICE PROVIDED:	
DATE OF SERVICE:	

PLEASE COMPLETE THE FOLLOWING:

COLUMN A – AREAS OF SERVICE

COLUMN B – FOR THIS PARTICULAR SERVICE OR PRODUCT PLEASE RANK THE ORDER OF IMPORTANCE OF EACH ITEM IN COLUMN A:

1= LEAST IMPORTANT → 5= MOST IMPORTANT

COLUMN C – PLEASE RATE YOUR EXPERIENCE IN EACH AREA: (1-5)

1 = PERFORMED FAR BENEATH MY EXPECTATIONS (EXPLANATION REQUIRED)

2 = SLIGHTLY UNDER EXCEEDED MY EXPECTATIONS

3 = MET MY EXPECTATIONS

4 = SLIGHTLY EXCEEDED MY EXPECTATIONS

5 = WAY ABOVE AND BEYOND MY EXPECTATIONS (EXPLANATION REQUIRED)

A <i>(area of service)</i>	B <i>(order of importance)</i>	C <i>(rate experience)</i>
STAYING IN CONTACT/RETURNING CALLS		
QUALITY OF SERVICE PERFORMED/PRODUCT		
PROFESSIONAL CONDUCT		
PROMPTNESS & COMPLETION OF SERVICE		
ADHERENCE TO COST		

WOULD YOU HIRE THIS PERSON AGAIN? YES NO

WOULD YOU RECOMMEND THIS PERSON TO OTHERS? YES NO

DID YOU COMMUNICATE YOUR ISSUES/CONCERNS WITH THE PERSON INVOLVED?
(IF APPLICABLE): YES NO

PLEASE EXPLAIN SCORES OF 1 OR 5 FROM COLUMN C ON BACK OF PAGE (IF APPLICABLE):

I UNDERSTAND THAT THIS DOCUMENT WILL BE HELD IN CONFIDENCE BY THE ETHICS COMMITTEE AND AGREE THAT ALL INFORMATION COMPLETED ABOVE IS TRUE. IT WILL ONLY BE PASSED ONTO THE BOARD UPON RECEIVING 3 POOR RATINGS OR TO HELP SETTLE ANY "IN-HOUSE" DISPUTES.

PRINT NAME: _____ DATE: _____

SIGNATURE: _____