|  |
| --- |
| Supplier: |
| Description service(s)/crop(s): |
| Period over which assessment has taken place: |
| Reviewed by: |

## Quality assessment

Consider the following topics (not all applicable):

* Quality of services and/or products provided (for seeds: quantity, germination, cleaned, free of diseases and pests; for services, e.g. functionality and user-friendliness of applications)
* Quality of growing conditions (e.g. irrigation, temperature, isolation from cross-pollinators, propagation on enough plants)
* Identity of seeds delivered (labels correct and clear)
* Price/quality ratio
* The supplier's expertise

**Quality score**

**         **

**Explanatory score**

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|  |

## Assessment service & communication

Consider the following topics (not all applicable):

* Delivery time
* Complete delivery (e.g. of all propagations)
* Overall communication, accessibility and responsiveness of the supplier
* Fulfilment of agreements (e.g. is there an increase in what was agreed for that year)
* Pro-activity of the supplier (e.g. feedback on deviations or problems)
* Transparency supplier (e.g. ability to view a propagation on site)

**Service & communication score**

**         **

**Explanatory score**

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| --- |
|  |

## Result

Very good: Both scores ≥8

Good: One score 7 and one score ≥7

Satisfactory: One score 6 and one score ≥6

Unsatisfactory: One or both scores ≤ 5

## Possible follow-up or improvement measures taken

Only in case of an assessment with unsatisfactory result, should a follow-up take place. See page 2.

## Follow-up or improvement measures taken

|  |  |  |
| --- | --- | --- |
| **Improvement discussion** | | |
| YES / NO  Conducted d.d.:.................Spoke with: .............................................................................................  Mode of communication: Telephone / oral / written / e-mail | | |
| **Agreed measures** | | |
|  | | |
| **Ultimatum?** | | |
| YES / NO  To: ................................................................... | | |
| **Evaluation** | | |
| Measures have been effective? YES / NO  Any follow-up measures? YES / NO  If yes, agreed follow-up measures: | | |
| **Final decision** | | |
| Continue relationship with this supplier |  | Maintaining on preferred supplier list |
| Continue relationship, but keep extra control |  | Info to person responsible for receiving or taking |
| Supplier to be used only if no alternative |  | Info to person responsible for purchasing |
| Terminate relationship with this supplier |  | Info to person responsible for purchasing |