

No. \_\_\_\_\_

Dated \_\_\_\_\_

## Supplier/ Vendor Evaluation Form

### **1. General:**

- i. Name of Supplier/ Vendor: \_\_\_\_\_
- ii. Address of Supplier/ Vendor: \_\_\_\_\_
- iii. Contact Person: \_\_\_\_\_
- iv. Phone No. \_\_\_\_\_
- v. Fax No. \_\_\_\_\_
- vi. Email: \_\_\_\_\_
- vii. Web Address: \_\_\_\_\_
- viii. Year of Establishment: \_\_\_\_\_
- ix. Facility Size: \_\_\_\_\_
- x. Category:  *Materials*  *Services*

### **2. Manufacturing Facility/ Process Facility**

- i. Does the supplier/ vendor has adequate machinery and equipment to supply materials/ services?  *Yes*  *No*
- ii. Describe available machinery/ equipment:

<i>Sr. #</i>	<i>Description</i>	<i>No.</i>	<i>State of Maintenance</i>
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

- iii. Does the supplier/ vendor maintain a maintenance schedule?  *Yes*  *No*
- iv. Does the supplier/ vendor has adequate knowledge of the manufacturing processes carried out by him?  *Yes*  *No*

- v. Does the supplier/ vendor maintain technical files on the manufacturing processes carried out by them?  Yes  No
- vi. Are tools, dies, jigs reconfirmed for compliance with manufacturing specifications after prescribed intervals?  Yes  No

### **3. Raw Material & Process Consumables Procurement**

- i. Are raw materials and process consumables are tested/ certified at the time of procurement as per required specifications?  Yes  No
- ii. Is record of raw materials and process consumables maintained?  Yes  No

### **4. Workmanship, Training, etc.**

- i. Are employees recruited on the basis of a defined job description?  Yes  No
- ii. a. Are employees provided with any training to perform a specified job?  Yes  No
- b. If the answer is yes, what type of training?
- Outside Training*    
  *In-house Training*    
  *On job Training*    
  *Apprenticeship*
- iii. Are employees properly briefed about the manufacturing processes to be carried out by them?  Yes  No
- iv. Are the craftsmanship/ workmanship of employees satisfactory?  Yes  No

### **5. Shop Floor Management**

- i. Is the working area designed according to process flow?  Yes  No
- ii. Are work stations designed to facilitate the process flow and manufacturing requirements?  Yes  No
- iii. Please indicate the sufficiency of the following:
- a. Space for each work station  Yes  No
- b. Lighting arrangements  Yes  No
- c. Air ventilation  Yes  No
- d. Dust collection  Yes  No

- e. Cleanliness  Yes  No
- f. Arrangement of tools  Yes  No
- iv. Please indicate the sufficiency of the following:
- a. Temperature control  Yes  No
- b. Chemical hazard control  Yes  No
- c. Electricity hazard control  Yes  No
- v. Do they equip workers with protective equipment appropriate to the work they do?  Yes  No
- vi. Do they have written working instructions for each machine or tool?  Yes  No
- How they make sure that workers understand those instructions? \_\_\_\_\_
- \_\_\_\_\_
- vii. Is machinery provided with adequate safety guards?  Yes  No
- viii. Do they have written procedures for storage, use and disposal of chemicals in a language that workers understand?  Yes  No

## **6. Quality Management System:**

- i. Do they have Quality Manual covering Quality Policy, Quality Objectives and Standard Operating Procedures (SOPs)?  Yes  No
- If answer is yes, which certification do they have? \_\_\_\_\_
- (Obtain copy of certificate for record)*
- ii. Is Quality Policy displayed at proper places?  Yes  No

## **7. Suppliers/ Sub-Contractors:**

- i. Do they have an approved list of material/ service suppliers?  Yes  No
- ii. Do they have any record demonstrating that the sub-contractors have monitored the working and environmental conditions meeting relevant standards?  Yes  No

## 8. Employment:

i. What is the employment procedure (i.e. the final recruiting authority etc.)?

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ii. Do they have a signed copy of contract of employment with each worker?

 Yes No

iii. Are workers informed about their legal rights as employees?

 Yes No

If answer is yes, by which method they are informed? \_\_\_\_\_

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iv. Do they hold workers' original identification documents?

 Yes No

v. Does management require medical examination as a condition for employment?

 Yes No

If yes, what kind of examination it requires? \_\_\_\_\_

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vi. Who has access to test results of the examination? \_\_\_\_\_

vii. What is employee turn over rate? \_\_\_\_\_

viii. Do they keep an up-to-date list of employees?

 Yes No

## 9. Child Labor:

i. Do they have a policy on Child labor?

 Yes No

ii. What is the legal minimum working age? \_\_\_\_\_

iii. What is the minimum working age in production facility? \_\_\_\_\_

iv. Do they possess evidence of the date of birth of each worker?

 Yes No

If yes, which kind of evidence do they hold? \_\_\_\_\_

v. Do they keep a list of workers under the age of 18?

 Yes No

vi. Do workers under the age of 18 operate machines?

 Yes No

vii. Do workers under the age of 18 work overtime or at night?

 Yes No

viii. Are workers under the age of 18 in contact with chemicals?

 Yes No

ix. Do workers under the age of 18 receive regular medical examination?  Yes  No

### **10. Working Hours, Wages & Accommodation:**

i. What is the standard working hours (excluding overtime) in a week? \_\_\_\_\_

ii. How many shifts per day does your plant normally work? \_\_\_\_\_

iii. How many hours of overtime per week? \_\_\_\_\_

iv. What is the maximum number of hours that employees work in a week? \_\_\_\_\_

v. How many days off do workers have per week? \_\_\_\_\_

vi. Do they keep records of the hours worked by each worker every week?  Yes  No

vii. Please specify system of payment?

*Piece Rate*

*Hourly*

*Per month*

viii. How often do workers get paid (pay period)? \_\_\_\_\_

ix. Do workers receive paid sick leave and paid annual leave?  Yes  No

x. Do they provide accommodation for workers?  Yes  No

xi. Is drinking water available to workers during work hours?  Yes  No

### **11. Disciplinary Procedures:**

i. Do they have a policy of disciplinary actions?  Yes  No

ii. Are all the workers informed about the company's disciplinary procedures?  Yes  No

If yes, which methods do they use to ensure that all workers are informed about the policy and understand the disciplinary procedures? \_\_\_\_\_

iii. Do they keep a log/ record of all disciplinary actions?  Yes  No

### **12. Health and Safety:**

i. Do they have a policy on health and safety?  Yes  No

ii. Do they carry out health and safety risk assessments?  Yes  No

- iii. Have they developed plans for continual improvement based on risk assessments and accident logs?  Yes  No
- iv. Do they have a fire alarm that can be heard in all areas of the production site?  Yes  No  
If yes, is the alarm regularly tested?  Yes  No
- v. Is the workplace provided with emergency exits?  Yes  No
- vi. How often do they check their fire fighting equipment? \_\_\_\_\_
- vii. May workers access first aid equipment in the workplace during all shifts?  Yes  No
- viii. Are medically competent personnel within reach if an accident occurs?  Yes  No

**13.Financial Strength:**

- i. Is the supplier/ vendor financially strong enough to manage a secure supply chain?  Yes  No
- ii. Does the supplier/ vendor maintain a bank account and accept payments through bank transfer?  Yes  No
- iii. Does the supplier/ vendor in a position to extend supplies on credit?  Yes  No  
If the answer is Yes, for what period? \_\_\_\_\_

**14.Comments and General Observations:**

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**15.Evaluation done by:**

- i. Procurement Manager: Name \_\_\_\_\_ Signature \_\_\_\_\_
- ii. Production Manager: Name \_\_\_\_\_ Signature \_\_\_\_\_
- iii. Quality Manager: Name \_\_\_\_\_ Signature \_\_\_\_\_

**16.Approved as Supplier by:**

CEO: Name \_\_\_\_\_ Signature \_\_\_\_\_  
Dated \_\_\_\_\_

## **Instructions:**

1. This evaluation form is to be used to approve suppliers in compliance with quality management system.
2. The evaluation team may consist of any or all of procurement manager, production manager and quality manager depending upon the nature of material/ service to be procured.
3. Once approved by the management, the supplier/ vendor should be included in approved list of suppliers as required to be maintained under quality management system.
4. A complete check is to be performed each year at the beginning of each calendar year.
5. Copies of evaluation and approval would remain available with procurement manager, quality manager and accounts department. However, permanent record shall be kept by the quality manager.