**SE-415**

**CM-R SELECTION COMMITTEE MEMBER EVALUATION - RFP**

**AGENCY:**

**PROJECT NAME:**

**PROJECT NUMBER:**

|  |  |  |
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| **EVALUATION CRITERIA** | **Ranking****Range** | **FIRMS** |
| **A** | **B** | **C** | **D** | **E** |
|  |       |       |  |  |  |  |  |
|  |       |       |  |  |  |  |  |
|  |       |       |  |  |  |  |  |
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|  |       |       |  |  |  |  |  |
| **TOTAL POINTS*(Use whole numbers only and break all ties before ranking)*** |  |  |  |  |  |
| **RANKING OF PERSONS OR FIRMS *(1,2,3…) (Transfer to SE-417)*** |  |  |  |  |  |

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| **FIRMS SUBMITTING PROPOSAL** |
| **A**.       | **D.**       |
| **B.**       | **E.**       |
| **C.**       |  |

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| **EVALUATOR CERTIFICATION**I hereby certify that I have evaluated all of the persons or firms and ranked them based on the Evaluation Criteria listed above and no other criteria were used. |
| **EVALUATOR NAME:**       | **DATE:**       |
| **EVALUATOR SIGNATURE:** |