

APPENDIX V

CONTRACT RENEWAL RECOMMENDATION FORM

Contractor/Company Name : _____		
Scope of Contract	:	_____
Current Contract Period	:	From _____ To _____
Department _____		
Name of Person in Charge of Contract _____		
Title _____		
Remarks (Quality of services delivered, competitive situation, any proposed changes to the terms of contract, etc.)		
Recommended for Renewal?	Yes	No
If Yes, I recommend Renewal From _____ To _____		
Signature _____		Date _____