**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)*** | | |  |  |  |  |  |

|  |  |
| --- | --- |
| **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:** | |