**DATE:** *Enter Date of Report  
 [ex. Wednesday, September 19, 2024]*

**TO:** *Enter Name of the Task Order Contracting Officer and title  
 [ex. Ms. Mary Jones - Contracting Officer, Office of Acquisitions]*

**FROM:** *Enter Name of the Technical Evaluation Panel Chairperson and title  
 [ex. Mr. John Glass - Technical Evaluation Panel Chairperson, COR]*

**SUBJECT:** Evaluation of *Enter TORP #* submissions

# Overview

The Technical Evaluation Panel (TEP) Meeting was convened on *[Date]*, *[Time]* and lasted for *[XX]* minutes via *[a teleconference, in person meeting, etc]* between *[Name of TEP members]*. The review process was explained and the issues of conflict of interest and confidentiality were stressed. The proposals were provided to the TEP for review before the meeting. The subject is a TORP for *[brief description of the requirement to offer context for the reader]*.

Members of the Technical Evaluation Panel:

VOTING MEMBERS: *[It is recommended that three voting members, or another odd number of voting members.]*

1. Mr/Ms. *[First Last]*, TEP Member and Chair
2. Mr/Ms. *[First Last]*, TEP Member
3. Mr/Ms. *[First Last]*, TEP Member

NON VOTING MEMBERS: *[It is recommended that no more than two non-voting members be identified.]*

1. Mr/Ms. *[First Last]*
2. Mr/Ms. *[First Last]*

This meeting was conducted in an organized manner. Each TEP member presented their independent review for each of the proposals in accordance with the evaluation criteria. There were no irregularities or unusual circumstances while the meeting was in progress. Each individual TEP member provided their rating which was used to compute the overall average score for each proposal.

# Complete List of Offerors

1. The following companies submitted a proposal:
2. *[Offeror A]*
3. *[Offeror B]*
4. …
5. Based upon the TEP’s review, *[List all companies determined to be technically acceptable]* were deemed technically acceptable.

# Technical Evaluation

The TORP released specified the following criteria and weight:

|  | TECHNICAL EVALUATION FACTOR | WEIGHTING |
| --- | --- | --- |
| 1 | Experience with International Issues | *[XX]* % |
| 2 | Corporate Experience | *[XX]* % |
| 3 | *[add factors as necessary to the list]* | *[XX]*% |
| 4 | *[add factors as necessary to the list]* | *[XX]* % |
|  | **TOTAL** | **100 %** |

* *Describe the rating method used for the evaluation of the proposals.*
* *For each offeror’s proposal, provide a summary of the TEP’s comments including numerical score and whether the offeror has been deemed technically acceptable or unacceptable followed by a list of specific strengths, weaknesses, and comments as identified by the TEP members.*

# Past Performance

* *Provide the results of your past performance review.*
* *A chart may be used to represent the information. See below for a sample rating scale and results table.*
* *Sample Rating Scale*

| # | RATING | DESCRIPTION OF RATING |
| --- | --- | --- |
| 5 | Excellent | Full and comprehensive range of past performances demonstrated related to task order requirements. Frequent examples cited of repeat customers/awards. |
| 4 | Good | Abundant and wide range of past performances demonstrated related to task order requirements. Several examples cited of repeat customers/awards. |
| 3 | Satisfactory | Sufficient past performances demonstrated related to task order requirements. Several examples cited of repeat customers/awards. |
| 2 | Marginal | Limited past performances demonstrated related to task order requirements. |
| 1 | Unacceptable | Inadequate information provided. |
| N/A | No Rating (Neutral) | No relevant past performances demonstrated. |

*Sample Results Table*

| OFFEROR NAME | RATING | COMMENTS |
| --- | --- | --- |
| *Offeror E* | *4* |  |
| *Offeror C* | *3* |  |
| *Offeror D* | *3* |  |
| *Offeror A* | *1* |  |

# Price Analysis

*Provide a table summarizing your review of the offerors’ business proposals. The sample below may be used or you may reference another spreadsheet that can be attached. Feel free to edit the table below to suit your requirement.*

*Sample Comparison Table*

|  | **Offeror A** | **Offeror B** | **Offeror C** | **Offeror D** | **Offeror E** |
| --- | --- | --- | --- | --- | --- |
| DIRECT COSTS |  |  |  |  |  |
| Labor |  |  |  |  |  |
| Labor Category 1 |  |  |  |  |  |
| Labor Category 2 |  |  |  |  |  |
| Labor Category 3 |  |  |  |  |  |
| Labor Category 4 |  |  |  |  |  |
| Labor Category 5 |  |  |  |  |  |
| **Subtotal** |  |  |  |  |  |
| OTHER DIRECT COSTS |  |  |  |  |  |
| Parking/Transportation |  |  |  |  |  |
| Airfare |  |  |  |  |  |
| Meals |  |  |  |  |  |
| Lodging |  |  |  |  |  |
| Room Tax |  |  |  |  |  |
| Honorariums |  |  |  |  |  |
| Shuttle |  |  |  |  |  |
| Postage/FedEx/etc. |  |  |  |  |  |
| **Subtotal** |  |  |  |  |  |
| INDIRECT COSTS |  |  |  |  |  |
| G&A |  |  |  |  |  |
| Fee |  |  |  |  |  |
| **Subtotal** |  |  |  |  |  |
| **Grand Total** |  |  |  |  |  |

* *Provide an overall assessment of each offeror’s price proposal. Provide a paragraph for each offeror.*

# Clarifications/Negotiations

* *NOTE: Clarifications/Negotiations must be communicated to the offerors through the Task Order Contracting Officer.*
* *Describe the clarifications/negotiations needed, or if not needed, type N/A.*
* *For each offeror, provide*
  + *the list of questions sent to the offeror(s).*
  + *date the questions were communicated.*
  + *how the questions were communicated (e.g., email, mail, federal express).*
  + *Responses from offeror(s)*
* *Provide the evaluation of each offeror’s response to the questions.*
  + *Unless substantial proposal changes were made, it is not necessary to reconvene the entire TEP. The Task Order CO and Task Order COR or a subset of the TEP will be sufficient.*

# Recommendation for Task Order Contract Award

* *Provide a summary paragraph(s) identifying the following:*
  + *The offeror the TEP recommends for award.*
  + *The basis for identifying this offeror for award. Be certain that the scores adequately reflect the written technical report comments.*

# Technical Evaluation Panel Chairperson Signature

Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (Signature): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_