

Security Contractor Performance Checklist

Contractor Name

Date of Evaluation

Evaluator Name

Checklist

Criteria	Yes	No	N/A	Comments
Guards in proper uniform and with ID	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Post assignments properly manned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Patrol schedules are followed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Incident reports submitted timely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Security equipment maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Professional conduct displayed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>

Additional Comments

Evaluator Signature