

Food Vendor Taste Testing Scorecard

Vendor Name:
Vendor Contact:
Tester Name:
Date:

Taste Test Scores

Dish	Appearance (1-5)	Flavor (1-5)	Texture (1-5)	Freshness (1-5)	Temperature (1-5)	Overall Score (1-10)	Comments

General Notes & Feedback

Would you recommend this vendor?