|  |  |  |  |
| --- | --- | --- | --- |
| Logo | **[Nombre de la empresa]** | Fecha: | Dd/mm/aaaa |
| Código: | 00 |

**FORMATO DE EVALUACIÓN DE PROVEEDORES**

|  |  |  |  |
| --- | --- | --- | --- |
| **Nombre/Razón social:** |  | **RFC:** |  |
| **Domicilio:** |  |
| **Teléfono:** |  | **Correo electrónico:** |  |
| **Representante legal:** |  |
| **Tipo de proveedor:** |  |

|  |  |  |
| --- | --- | --- |
| **Criterios de evaluación** | **Cumple** | **Calificación** |
| **Factor** | **Criterio** | **Sí** | **No** | **Máx.** | **Asig.** |
| [Agregar texto] | [Agregar texto] |  |  |  |  |
| [Agregar texto] | [Agregar texto] |  |  |  |  |
| [Agregar texto] | [Agregar texto] |  |  |  |  |
| [Agregar texto] | [Agregar texto] |  |  |  |  |
| [Agregar texto] | [Agregar texto] |  |  |  |  |
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| [Agregar texto] | [Agregar texto] |  |  |  |  |
| [Agregar texto] | [Agregar texto] |  |  |  |  |
| **Calificación total** |  |  |
|  |
| **Observaciones** |
| [Agregar texto] |
|  |
| **Interpretación de la calificación** |
| **Calificación** | [Agregar texto] | [Agregar texto] |
| [Agregar texto] | [Agregar texto] |
| [Agregar texto] | [Agregar texto] |
|  |
| **Área encargada** |
| **[Nombre del departamento]** |  |
| [Nombre del responsable] |
| **[Cargo que ocupa]** |