ATTN: Kendalyn White

COUNTY OF SAN DIEGO CEQA CONSULTANT LIST **CONSULTANT PAST PERFORMANCE REVIEW FORM**

Арр	licant: F	ill out the top por	tion of this form a	and send to the a	oplicable review	er for completion.	
Applicant's Name:			Subject Area:				
Revi	iewer Na	ame:	Title:				
Lead	d Agend	;y:					
Pho	ne:			Email:			
The	review i	s based on the Co					
Proj	Project Name: Da				Dates of Performance:		
Con	Consultant's Role:						
Revi	iewer: (Complete the follow	wing and send di	rectly to the Cour	nty of San Diego	as detailed below.	
ICVI	icwei. c	omplete the follo		•	ity of Gan Biege	as detailed below.	
N	IR*	1	RATING 2	SCALE 3	4	5	
No Ratin		Unacceptable	Below Average	Satisfactory	=	_	
*Use NF	R when r	not applicable or s		ion or experience	is not available	to provide a rating.	
Rate your experience with the Consultant:						Rating	
A. Coo	rdinatior	NR 1 2 3 4 5					
B. Coo	rdinatior	NR 1 2 3 4 5					
C. Com	nmunica	NR 1 2 3 4 5					
D. Qua	D. Quality of work.						
E. Adh	E. Adherence to schedule.						
F. Adh	F. Adherence to budget.						
G. Kno	G. Knowledge of subject matter.						
H. Kno	wledge o	NR 1 2 3 4 5					
I. Ove	. Overall performance.						
timelines:		ultant's capacity a	·	· ·		oleting work within se	
Reviewer Signature: Date:							
						e via email to	

Kendalyn.White@sdcounty.ca.gov or via U.S. mail to County of San Diego, Planning & Development

Services, Attn: Kendalyn White, 5510 Overland Avenue, Suite 210, San Diego, CA 92123.