

Supplier Self Assessment

Company _____
Address _____
City _____
Country _____
Postcode _____

Phone _____
E-Mail _____
Homepage _____

General Information

Year of Foundation _____
Owner _____
Total Employees _____
Certifications _____
Holding Company _____
Subsidiaries _____

	First Name	Last Name
General Manager	_____	_____
Sales Manager	_____	_____
Procurement Manager	_____	_____
Production Manager	_____	_____
Engineering Manager	_____	_____
Quality Manager	_____	_____

	Phone	E-Mail	Communication Languages
General Manager	_____	_____	_____
Sales Manager	_____	_____	_____
Procurement Manager	_____	_____	_____
Production Manager	_____	_____	_____
Engineering Manager	_____	_____	_____
Quality Manager	_____	_____	_____

Financial Information

	Currency	2020	2020	2021	2022	2023	Budget 2024
Turnover							
Operating Results							

Field of Activity

Core Competences

Documentation

Brochures and Product Information

Reference List

Organisation Chart

List of machines and equipment

Annual report

Supplier Comment

Pace, Date _____

Name _____

Function _____

Signature _____