Dept. X Audio Digitization/Preservation RFP
Questions for References

Scope of Project:

- What kind of tape media was your original material recorded on? What kind of equipment was used for the original recording and what were the circumstances under which the material was recorded?

- How old was your tape media, and was it spoken word or music?

- How many hours of tape did you have for digitization?

- What digital format did you request and what was the delivery method requested?

- What type of metadata information did you request?

- What interaction did you have with the vendor’s personnel throughout the process?

Results:

- Were the digital files delivered to you in the format you requested and on the media you requested?

  __________ Yes (1 points) __________ No (0 Points) _____ Score

- Was each file adequately identified to allow easy access to the material, using your original identification system?

  __________ Yes (1 points) __________ No (0 Points) _____ Score

- Was the material delivered according to the timeframe you had requested and agreed upon with the vendor?

  __________ Yes (1 points) __________ No (0 Points) _____ Score

- Were you pleased with the sound quality?

  __________ Yes (1 points) __________ No (0 Points) _____ Score
• Was the metadata insertion completed as you requested and was it clear and organized?

__________Yes (1 points) __________No (0 Points) ______Score

• Were your original tapes returned to you in good condition and organized in the same way as you sent them?

__________Yes (1 points) __________No (0 Points) ______Score

• In any interaction with the staff, were they knowledgeable about the project, able to answer your questions, and helpful?

__________Yes (1 points) __________No (0 Points) ______Score

• Were you satisfied with the vendor’s work?

__________Yes (1 points) __________No (0 Points) ______Score

• Were you satisfied with the vendor’s response time to any questions or issues you had about the project?

__________Yes (1 points) __________No (0 Points) ______Score

• Would you go back to them for a similar project?

__________Yes (1 points) __________No (0 Points) ______Score

_____Total Score

Proposal submitted by:  
Reference Name:  

_________________________  ________________________  
(Vendor name)    (Contact & Company name)

Client/Project references verified by: ______________ Date: ______ Initials: ______