

Statement of Diversity Status

I. GENERAL INFORMATION

Company Name: _____

Dun & Bradstreet ID: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Title: _____

Phone: (____) _____ Email: _____

Fax: (____) _____ Website: _____

Type of Firm: Corporation Partnership Individual Other: _____

Type of Business: _____

Year Business Established: _____ SIC/NAICS Code(s): _____

II. DIVERSITY STATUS

Are you a Diverse Supplier? YES NO

If you answered yes to the previous question please answer ALL of the following questions:

Are you a Minority Business Enterprise? YES NO

Please check all that apply:
 African American Asian Indian American Asian Pacific American
 Hispanic American Native American

Are you a Woman Business Enterprise? YES NO

Are you a Disabled Business Enterprise? YES NO

Are you a Disabled Veteran Business Enterprise? YES NO

Are you a Veteran Owned Small Business? YES NO

III. THIRD PARTY CERTIFICATION

Has your Diverse Supplier status been certified by a federal, state, municipal government, or any of the local councils (WBENC, NMSDC, etc)? YES NO

Certifying Agency: _____

Date Certified: _____ Expiration Date: _____

PLEASE ATTACH A COPY OF YOUR CERTIFICATION DOCUMENTATION

IV. SIGNATURE

ON BEHALF OF THE SUPPLIER IDENTIFIED HEREIN, THE UNDERSIGNED CERTIFIES THE STATEMENTS AND ALL ANSWERS TO QUESTIONS LISTED ABOVE AS TRUE AND CORRECT.

Name of Authorized Representative:	Title:
Signature:	Date: