



TEXARKANA
Independent School District

Vendor List Application Form

This application form is intended to facilitate identifying qualified vendors that desire to be considered for business opportunities with Texarkana Independent School District through the competitive procurement process. Please fill out the information requested below and return to:

Texarkana ISD
Attn: Purchasing
4241 Summerhill Rd.
Texarkana, TX 75503

OR

Fax: 903.792.2632
Attn: Purchasing
email:angel.legrand@txkisd.net

Vendor Name: _____

Vendor Address: _____

Vendor Address City, State and Zip: _____

Vendor Contact Person & Title: _____

Vendor Phone Number: _____

Vendor Fax Number: _____

Vendor Email: _____

Authorized Agent Name: _____

Type of Business (Small, Women, Minority HUB): _____

Commodity Listing (be specific): _____

Submittal of this vendor application is for the convenience of the Purchasing Department only and does not imply or guarantee to the submitter the receipt of any information (bid or quote requests, etc.)