

Vendor Application Form

Check all that apply

- ☐ New Vendor
- ☐ Change Vendor
- ☐ Sole Source (District Sole Source Affidavit)
- ☐ Board Approved (Attach Board Approval)
- ☐ Bid Approved (Bid # _____)

Requestor Information

School/ Dept. _____

Phone/Ext. _____

Date Form Submitted _____

Date of Services Rendered _____

Vendor Information

Name _____ Services Provided _____

Email Address/Purchase Orders _____

Vendor Category:

- | | | |
|--|---|---|
| ☐ Board Members | ☐ Hotel | ☐ Restaurant/ Catering |
| ☐ Conference/ Seminar | ☐ Independent (Daycare, Flowers, Medical, Rentals, etc.) | ☐ School/University |
| ☐ Consultant (Complete Package) | ☐ Official | ☐ Student |
| ☐ Employee (I.D. # _____) | ☐ Parent | ☐ Tutors |
| ☐ Government Agency | | ☐ Other _____ |

For Business Office Use Only

Approval: Yes ☐ No ☐ Initials _____

Vendor # _____ Date Entered _____ Initials _____

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