



## REQUEST FOR NEW VENDOR

TO BE FILLED OUT BY DUNCANVILLE ISD PERSONNEL

| NEW VENDOR REQUEST<br>CONTACT INFORMATION                                                                                                                                                                                                                                                                  |                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Department/School:                                                                                                                                                                                                                                                                                         | Date of Request: |
| Person Requesting the new vendor:                                                                                                                                                                                                                                                                          |                  |
| What type of funds will be used when purchasing from vendor:<br><u>(Example: student activity, campus activity, local monies or grant monies, federal funds)</u><br><br><u>Amount of money that you will be spending:</u><br><br><u>Is this vendor an Interlocal Agreement (Buyboard, DIR, TCPN, etc.)</u> |                  |
| <b>[Reason for the new vendor request is required]</b>                                                                                                                                                                                                                                                     |                  |
| Vendor Name:                                                                                                                                                                                                                                                                                               |                  |
| Contact Person at Company:                                                                                                                                                                                                                                                                                 |                  |
| Phone Number of Vendor:                                                                                                                                                                                                                                                                                    |                  |
| Email Address of Contact Person:                                                                                                                                                                                                                                                                           |                  |

Email completed page along with all other New Vendor Application forms to:  
**[cmaldonado@duncanvilleisd.org](mailto:cmaldonado@duncanvilleisd.org)**