



# WSSU

## WINSTON SALEM STATE UNIVERSITY Contractors and Suppliers Profile

<b>General Information</b> (Please type in spaces provided)			<b>Vendor No.</b> (Internal Use Only)		
<b>General Contractors – If subcontractors are used, please give them a copy of this form to complete</b>					
Company Name		Federal Tax ID	Website		Email
Contact Name		Title	Telephone #:	Fax #:	# of Employees
Address		City	State	Zip Code	Structure of Company <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other
WSSU Project Name (If given):			WSSU Project Manager:		
<b>Check type of service(s) below:</b> (Please provide copy of Contractor's License)				<b>Geographic Service Area</b>	
<input type="checkbox"/> Asbestos Consultant	<input type="checkbox"/> General Contractor	<input type="checkbox"/> Structural Engineer	National <input type="checkbox"/>	Regional <input type="checkbox"/>	Local <input type="checkbox"/>
<input type="checkbox"/> Acoustical/Sound	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Site Concepts	Core Competency: <b>Please do not skip this question.</b> What gives firm a competitive advantage in your chosen field?		
<input type="checkbox"/> Architectural	<input type="checkbox"/> Mechanical Engineer	<input type="checkbox"/> Theater			
<input type="checkbox"/> Landscape Architect/Master Plan	<input type="checkbox"/> Museum Consultant	<input type="checkbox"/> Track Layout Services			
<input type="checkbox"/> Civil Engineering	<input type="checkbox"/> Parking/Deck	<input type="checkbox"/> Traffic Engineer			
<input type="checkbox"/> Construction Manager	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Radio Tower			
<input type="checkbox"/> Cost Accounting	<input type="checkbox"/> Programming/Design	<input type="checkbox"/> Supplier			
<input type="checkbox"/> Environmental Engineer	<input type="checkbox"/> Security	<input type="checkbox"/> Other (If other list)			
<input type="checkbox"/> Electrical Engineer	<input type="checkbox"/> Sprinkler Consultant				
<input type="checkbox"/> Food Service	<input type="checkbox"/> Special Services				
<b>License Limit:</b>		<b>License Classification:</b>		Bonding Information: Can Contractor bond a contract?: <input type="checkbox"/> Yes <input type="checkbox"/> No	
				Bonding Capacity: <input type="checkbox"/> Single Job <input type="checkbox"/> Aggregate	
<b>Is firm HUB certified?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In Process			<b>List type of services and/or commodities provided:</b> <b>Do not skip</b>		
<b>HUB Certificate attached:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>HUB Section:</b> Check all that apply (If yes, please check appropriate HUB Type below.) If contract is awarded to your firm, HUB forms must be completed - Affidavits A, B, C & D					
<b>HUB Type (If applicable)</b>		<b>Source of Ownership: Certification Agency/Verification</b>		<b>Have you provided service to any campuses/institutions? If so, please explain.</b>	
<input type="checkbox"/> Non-Minority	<input type="checkbox"/> B-African American	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> State of North Carolina HUB		
<input type="checkbox"/> H-Hispanic	<input type="checkbox"/> AA-Asian American	<input type="checkbox"/> State of North Carolina DOT	<input type="checkbox"/> Local Agency		
<input type="checkbox"/> AI-American Indian	<input type="checkbox"/> W-Woman (non-minority)	<input type="checkbox"/> Federal Agency	<input type="checkbox"/> Out of State Agency		
<input type="checkbox"/> D-Socially & Economically Disadvantaged	<input type="checkbox"/> Other, Explain: _____	<input type="checkbox"/> Minority-Non-Certified (A minority firm but not certified)	<input type="checkbox"/> Unknown		
<b>Supplier provide total gross sales for the past 3 years, if contractor provide project total (\$) below:</b>			<b>Annual Sales (\$)</b>		
Year:	Sales Volume (\$)	Year:	Sales Volume (\$)	Year:	Sales Volume (\$)
<b>Job References</b>		<b>Contact Name</b>		<b>Telephone Number</b>	
<b>Note: Failure to answer all questions may result in missed opportunities and company not listed in database. Please attach company literature and other information if needed to answer questions more completely. Typed signature is permitted.</b>					

Signature of Owner or Company Officer

Title

Please email completed PDF form to: Brenda Fulmore, A.P.P., Director of Supplier Diversity, email: [fulmoreb@wssu.edu](mailto:fulmoreb@wssu.edu), telephone # 336-750-8834.  
**Cannot use if form is scanned.**

Thank you for your interest in Winston Salem State University