Vendor Information Form

$Northwestern \mid {\tt PROCUREMENT~\&~PAYMENT~SERVICES}$

Company Name:		
DBA (If applicable):		
Contact Name:		
Email Address:		
Address:		
STREET	CITY STATE ZIP	
Phone Number:	Fax Number:	
Dun & Bradstreet Number:	Federal ID Number:	
Company Website:		
Are you currently a Northwestern University vendor?	☐ Yes ☐ No	
If yes, for which Departments/Schools?		
Product or Service Offered:		
Are you a diverse vendor?		
If yes, list your Certification:		
Small Business (SB)	☐ Hubzone Small Business (HUBZONE)	
☐ Woman-Owned Small Business (WOSB)	☐ Small Business Program 8(a)	
☐ Veteran-Owned Business (VOB)	☐ Minority Business Enterprise (MBE)	
☐ Small Disadvantaged Business (SDB)	☐ Woman Business Enterprise (WBE)	
Service-Disabled Veteran-Owned (SDVOB)	☐ Local Business Enterprise – Evanston (LBE)	
Certifled By:		
City of Chicago	☐ CMBDC	
☐ IDOT	□WBDC	
Cook County	■ Metra	
☐ CMS State of IL	Other:	
☐ Small Business Administration		
Submit this Form via Email to procurement@northwesto	tern.edu or Fax to 847.467.5400	

Submit via Email