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**Norman Public Schools Purchasing Department**

131 South Flood / Norman, Oklahoma 73069

P: 405-447-6555 F: 405-573-3555

**CONTRACTOR QUALIFICATION FORM**

DATE: \_\_\_\_\_ FEDERAL ID OR SS#: \_\_\_\_\_

1. Name & complete mailing Address for Bidding Forms and Purchase Orders:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Mailing Address for Payments (If different from item #1)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Type of Organization (check one)

Individual       Partnership       Non-Profit Organization       Other  
 Corporation, Incorporated Under Laws of the State of \_\_\_\_\_       Joint Venture

Provide contact information for all company financial officers / CEO's / President / etc.:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. How long has your organization been in business as a contractor? \_\_\_\_\_

5. How long have you been doing business under the current name? \_\_\_\_\_

6. Under what other names has your organization operated? \_\_\_\_\_

\_\_\_\_\_

7. Persons Authorized to Sign Bids, Offers, Contracts (Indicate if agent)

NAME	POSITION IN COMPANY	TELEPHONE/FAX
_____	_____	_____
_____	_____	_____

*Any misrepresentation or false information will result in this vendor being barred from doing business with the Norman Public Schools, Norman, Oklahoma, and may result in related legal action.*

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8. Persons to Contact on Bids or Quotes:

NAME	POSITION IN COMPANY	TELEPHONE/FAX
_____	_____	_____
_____	_____	_____

9. Type of Business:

<input type="checkbox"/> Manufacture	<input type="checkbox"/> Factory Representative	<input type="checkbox"/> Wholesale Dealer
<input type="checkbox"/> Construction	<input type="checkbox"/> Unlimited Contractor	<input type="checkbox"/> Limited Contractor
<input type="checkbox"/> Retail Dealer	<input type="checkbox"/> Wholesale Dealer	
<input type="checkbox"/> Service Establishment - Define _____		
<input type="checkbox"/> Other - Define _____		

10. Has your organization ever failed to complete an awarded contract?  NO  YES  
If yes, please explain what project, with whom, and how the situation was resolved:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Attach extra sheets if necessary.

11. Is your organization currently prohibited from doing business in any state?  NO  YES  
If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that the information supplied herein is correct.

\_\_\_\_\_  
Print or Type Name and Title

\_\_\_\_\_  
Signature