

**Nevada System of Higher Education**  
**Western Nevada College - Purchasing**  
(Include a W9 form with this application)  
**Vendor Application Form**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Web: \_\_\_\_\_

**Remittance address if different than above:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Department: \_\_\_\_\_  
Phone: \_\_\_\_\_  
FAX: \_\_\_\_\_

Indicate goods or services provided: \_\_\_\_\_

**Contractor's License #**

**Business Type (check all appropriate categories):**

- Individual     Sole proprietorship     Limited Partnership     Non-Profit     Corporation     Limited Liab. Corp.  
 Other: \_\_\_\_\_

**Disadvantaged Business Enterprise Designation: (PLEASE SELECT ALL THAT APPLY)**

- MINORITY OWNED BUSINESS:** An independent business which performs a commercially useful function and is at least 51% owned and controlled by one or more minority persons of African American, Hispanic American, Asian Pacific American or Native American Ethnicity. Please specify ethnicity: \_\_\_\_\_
- WOMEN OWNED BUSINESS:** An independent business which performs a commercially useful function and is at least 51% owned and controlled by one or more women.
- DISABLED/VETERAN DISABLED OWNED BUSINESS:** An independent business which performs a commercially useful function and is at least 51% owned and controlled by one or more disabled and or veteran disabled individuals pursuant to the American with Disabilities Act or who have served in the active military and discharged under conditions other than dishonorable.
- SMALL BUSINESS ENTERPRISE:** An independent business which performs a commercially useful function is not owned and controlled by individuals designated as minority, woman, and veterans or physically challenged and where gross sales do not exceed \$2,000,000.
- HISTORICALLY UNDERUTILIZED BUSINESS ZONE:** The HUB Zone Empowerment Contracting Program provides federal contracting opportunities for qualified small businesses located in distressed areas.

If you checked any of the above, have you been certified? (Small Business Administration 8A program or other Federal or state small disadvantaged business certification.)     Yes     No

If yes, by which agency: \_\_\_\_\_

**Is Business Owned/Operated by:**

- A member of the Board of Regents of the Nevada System of Higher Education:     Yes     No  
A Nevada System of Higher Education employee:     Yes     No  
NSHE institutions are: NSHE Chancellor's Office, CSN, DRI, GBC, NSC, SCS, TMCC, UNLV, UNR, and WNC.  
A member of a NSHE regent or employee's household:     Yes     No

**Inquiries regarding this form or any part of the purchasing process should be addressed to:**  
**Western Nevada College-Purchasing | 2201 W College Pkwy, Carson City, Nevada 89557-0242**  
**Phone: 775-445-4280 | Fax: 775-445-3027**