

COMPANY SUMMARY FORM

NAME OF PRIME PROPOSER:	RFQ #:
PROJECT(S) / CONTRACT:	RFQ DATE:

COMPANY PERSONNEL: Identify the number of individuals, including owners, that are full-time employees of the business in the following areas: Total African-Hispanic-Asian-Native-Non-Minority Service-Non-Minority Classification number of American American American American Woman Disabled (See note (AA) (HA) (AS) (NA) (W) Veteran (SDV) Employees Administrative/ Management Professional/Technical Clerical Craftsperson/Laborers Total

OWNERSHIP & OFFICERS/BOARD MEMBERS/MANAGING PARTNERS:

Identify the owner, each partner, or stockholder by name, as well as his/her citizenship or residency status, gender, ethnicity and percentage of ownership:

OWNERS					
Name	% Owned	Resident or US Citizen	Gender	Ethnicity	

OFFICERS					
Name	Title	Gender	Ethnicity		

Note: Non-minority means an employee who does not fall under any category defined as a minority in School Board Policy 6320.02

below)