

BECOMING A VENDOR

Process Guide for Staff and Vendors

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Vendor Qualifications

In order for a vendor to be entered into our system for selection, they must meet the following requirements:

- The vendor must be incorporated for a total of 2 full calendar years.
- The vendor must be registered to do business in the state of Illinois regardless of the state of origin.
- The vendor must also be in good standing with the Illinois Secretary of State. Please be sure to check your good standing status with the link provided here: <https://apps.ilsos.gov/corporatellc/>
- If a vendor is an individual they must provide proper evidence showing 2 or more years of experience in their field.

Required Documentation

A vendor must submit all required pieces of documentation in order to be in consideration:

- 1) Vendor Application
 - a) Vendor Information
 - b) W-9
 - c) Conditions of Purchase
 - d) Ethics Orientation
 - e) NIGP Codes
- 2) Economic Disclosure Statement
 - a) General Information
 - b) Disclosure of Ownership Interest
 - c) Compliance
 - d) Disclosure
 - e) Certifications
 - f) Acknowledgements

Each document must be completed fully and correctly in order to move forward in the process.

Required Information

Below you will find the instructions to complete the Vendor Application form. Please select if this is an initial, updated or new payment type at the top of the form. All requested information must be complete and accurate in order to be processed.

VENDOR APPLICATION FORM

Initial Application
 Update Address/Contacts/Other
 New Payment Information

1. VENDOR INFORMATION

Vendor Name: 1		Parent Company (if applicable, as indicated for tax reporting): 2	
Years in the Business: 3	FEIN/SSN Number: 4	Dun & BradStreet Number: 5	
Mailing Address: 6			
City:	State/Province:	Zip/Postal Code:	
Telephone:	Email Address:	Website Address:	
Tax Information – Note: Completed W-9 Forms must be submitted with the vendor application:			
7 <input type="checkbox"/> Corporation <input type="checkbox"/> Individual / Sole Proprietor <input type="checkbox"/> Foreign Government Agency <input type="checkbox"/> LLC <input type="checkbox"/> Government Agency <input type="checkbox"/> Foreign Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other <input style="width: 100px;" type="text"/> <input type="checkbox"/> Foreign Partnership			
M/WBE Vendors (if applicable)			
8 Please indicate if you are one of the following. Note: Your current letter of certification MUST accompany your vendor application. <input type="checkbox"/> Certified Women’s Business Enterprise (WBE) <input type="checkbox"/> Certified Minority Business Enterprise (MBE)		Ethnicity (Please check appropriate category): <input type="checkbox"/> African American <input type="checkbox"/> Native/Indigenous American <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other: <input style="width: 100px;" type="text"/>	

1. Place the name of your company
2. If a parent company exists, fill in this field
3. Fill in your years in business
4. Place your tax ID here
5. If you have a Duns and Bradstreet ID, enter it here
6. Fill in your mailing address along with your telephone number, email address and website address. Your mailing address must be a physical address and not a P.O. box
7. Choose your business classification here
8. If applicable, select your MWBE certification

Required Information (cont.)

2. CONTACTS

Contact Title	Name	Contact Phone #	Contact Email Address
① Primary Contact			
② Main Bid/Quote Contact			
③ M/WBE Management Contact			
④ Accounts Receivable Contact			
⑤ Other: _____			

1. The information for CCC's primary contact for your company should go here.
2. Information for the sales contact of your company should go here
3. Provide your company MWBE representative information here
4. List the accounts receivable contact information here
5. Please provide the contact information for the person responsible for making changes to banking/payment information (if not provided above) here.

Fill in these fields to the best of your knowledge

Required Information (cont.)

3. **PAYMENT PREFERENCE:** Please check all boxes that apply.

- ACH (Net 45)
 Single Use Accounts (SUA) (Net 15)
 Check (Net 60)

Please submit your payment preference information which is required below:

ACH Preferred		
Bank Name:	ABA Routing Number:	Account Number:
SUA Payment Method		
Contact Accounts Payable via email at accountpayableservices@ccc.edu		
Check Preferred <input type="checkbox"/>		
Vendor Name:		
Address:		
City:	State/Province:	Zip/Postal Code:

I hereby certify that I am registered to do business in the State of Illinois and in Good Standing

IMPORTANT: City Colleges of Chicago requires that no employee or Board of Trustee may have a special interest in any contract paid with funds belonging to or administered by the Board of Trustees. If you/your firm has such a relationship, attach a separate sheet explaining that relationship. All transactions are governed by the laws of the State of Illinois, the Illinois Public Community College Act, and Board of Trustees Rules for the Management and Government of the City Colleges of Chicago.

By signing below, I hereby certify that while doing business with City Colleges I will remain in Good Standing with the Illinois Secretary of State and that all information supplied herein is correct

Name & Title (Please print or type)	Signature	Date

1. Select your payment preference here. You may only select one option (ACH/ Deposit, SUA, or Checking)
2. If ACH is preferred, enter the full name of your bank, routing number and account number. If you prefer to use a Single Use Account (SUA), contact the accounts payable department via the email provided
3. If check is the preferred method of payment, check the box and fill in the requested information here
4. By checking this box, you are certifying that you are registered with the Illinois Secretary of State and are currently in good standing.
5. By printing and signing your name, you certify that you will remain in good standing with the Illinois Secretary of State as long as you continue to do business with City Colleges of Chicago and that the information you have provided is complete and correct.

Required Information (cont.)

Please complete the W9 section in full before moving on to the next portion

CONDITIONS OF PURCHASE

1	Vendor's Name <input type="text"/>	2	Date <input type="text"/>
3	<input type="text"/> Signer's Name	4	<input type="text"/> Signature

Please read our Conditions of Purchase section thoroughly

1. Enter the name of your company here
2. Provide date here
3. Print the company representative's name here.
4. The company representative signs here acknowledging and agreeing to City Colleges of Chicago's Conditions of Purchase

CITY COLLEGES OF CHICAGO ETHICS ORIENTATION CONTRACTORS/VENDORS

VENDOR/CONTRACTOR ACKNOWLEDGEMENT

I affirm that I have received the Ethics Orientation Contractors/Vendors packet. I further affirm that I will read the full text of the City Colleges of Chicago Ethics Policy.

1	<input type="text"/>	2	<input type="text"/>
FIRM NAME		SUBMITTED BY	
3	<input type="text"/>	4	<input type="text"/>
DATE		TITLE	
5	<hr/> <input type="text"/>		
SIGNATURE			

**Please read our Ethics Orientation for contractors/ vendors.
City Colleges of Chicago does not accept exceptions to this document.**

1. Enter the name of your company here
2. Print your company representative's name
3. Enter the current date
4. The company representative places their title here
5. The company representative signs here

Required Information (cont.)

The NIGP codes (National Institute of Governmental Purchasing) are a universal taxonomy for identifying commodities and services in procurement.

National Institute of Governmental Purchasing Commodity Codes

Please select at least one product or service that your organization can provide to CCC from the following dropdown lists.

1 Supplies

Select items in the dropdown list	▼
Blank	▼
Blank	▼
Blank	▼

2 Services

Select items in the dropdown list	▼
Blank	▼
Blank	▼
Blank	▼

Please provide additional information regarding the specific products / service you will be providing to City Colleges of Chicago.
We may contact your firm for additional commodity information.

3

1. If your company will be providing goods to CCC, please use these dropdown fields to select the types of goods you provide
2. If your company will be providing services, please use these dropdown fields to select the types of services you provide
3. Use this field to enter the specific goods/services that you plan on providing City Colleges. If you receive a document with a non-working drop down, you may also use this field to enter your codes

Vendor Application Form: Points of Note

- Please be sure to fill out and sign the W-9 form clearly and legibly.
- Please use “N/A” or “None” for any fields that do not apply to you or your organization
- Fill out and sign the Conditions of Purchase section
- Read and sign CCC' s Ethics Orientation section
- Be sure to fill out the NIGP (Commodity Codes) to the best of your ability
- The main address provided must be a physical address not a P.O. Box

Economic Disclosure Statement Instructions

Community College District No. 508 ("CCC") requires disclosure of the information requested in this Economic Disclosure Statement and Affidavit ("EDS") before any CCC department or CCC Board action regarding the matter that is the subject of this EDS. Please fully complete each statement, with all information current as of the date this EDS is signed. If a question is not applicable, answer with "N.A." An incomplete EDS will be returned and any CCC action will be delayed.

Please print or type all responses clearly and legibly. Add additional pages if needed, being careful to identify the portion of the EDS to which each additional page refers.

For purposes of the EDS:

"**Applicant**" means any entity or person making an application to CCC for action requiring CCC or CCC Board approval including bids, solicitations and other contract and lease proposals.

"**Disclosing Party**" means any entity or person submitting an EDS. If the Disclosing Party is participating in a matter in more than one capacity, please indicate each such capacity in Section 1.F. of the EDS.

"**Entity**" or "**Legal Entity**" means a legal entity (for example, a corporation, partnership, joint venture, limited liability company or trust).

"**Person**" means individual.

WHO MUST SUBMIT AN EDS:

An EDS must be submitted by Persons or Entities that are:

1. **Applicants:** An Applicant must always file this EDS. If the Applicant is a Legal Entity, state the full name of that Legal Entity. If the Applicant is a Person acting on his/her own behalf, state his/her name
2. **Entities holding an interest in the Applicant:** Whenever a Legal Entity has a beneficial interest (i.e. direct or indirect ownership) of more than 7.5% in the Applicant, each such Legal Entity must file a separate EDS on its own behalf
3. **Controlling entities:** Whenever a Legal Entity directly or indirectly controls the Applicant, each such controlling Legal Entity must file a separate EDS on its own behalf

Economic Disclosure Statement Instructions (cont.)

SECTION I -- GENERAL INFORMATION

A. Legal name of Disclosing Party submitting this EDS. Include d/b/a/ if applicable:

1

Check ONE of the following three boxes:

Indicate whether Disclosing Party submitting this EDS

the Applicant

OR

2

a legal entity holding a direct or indirect interest in the Applicant.

State the legal name of the Applicant in which Disclosing Party holds an interest:

OR

a specified legal entity with a right of control (see Section II.B.1.b.).

State the legal name of the entity in which Disclosing Party holds a right of control:

1. Enter the name of the individual, organization or representative of an organization that is applying to become a vendor here
2. Select one of the three boxes given
 1. If you are an individual or a representative of the applying company, please select box 1
 2. If you are a parent organization applying for your associate company, please select box 2
 3. If you are a company that holds controlling interest in the applying corporation, please select box 3

Economic Disclosure Statement Instructions (cont.)

B. Business address of Disclosing Party: ①

Address:

City: State/Province: Zip/Postal Code:

C. Telephone: Email:

D. Name of contact person:

② E. Federal Employer Identification No. (if you have one):

F. Brief description of contract, transaction or other undertaking (referred to below as the "Matter") to which this EDS pertains. (Include project number and location of property, if applicable):

③

1. Enter the address and contact information of the business applying for application. The address must be a physical address belonging to the entity and not a P.O. Box
2. If you are an individual please enter your social security number here. If you are applying for a corporation please enter your EIN/Tax ID number here
3. List the goods/services you are going to provide City Colleges under this section. If you are applying under a specific project/engagement please provide that information here

Economic Disclosure Statement Instructions (cont.)

SECTION II -- DISCLOSURE OF OWNERSHIP INTERESTS

A. NATURE OF DISCLOSING PARTY

1. Indicate the nature of the Disclosing Party:

- | | |
|---|---|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Limited liability partnership* |
| <input type="checkbox"/> Privately held business corporation | <input type="checkbox"/> Joint venture* |
| <input type="checkbox"/> Publicly registered business corporation | <input type="checkbox"/> Limited partnership* |
| <input type="checkbox"/> Trust | <input type="checkbox"/> Limited liability company* |
| <input type="checkbox"/> Sole proprietorship | <input type="checkbox"/> General partnership* |
| <input type="checkbox"/> Not-for-profit corporation | |

(Is the not-for-profit corporation also a 501(c)(3))? Y N

Other (please specify)

* Note and complete B.1.b below.

2. For legal entities, the state (or foreign country) of incorporation or organization, if applicable:

For legal entities not organized in the State of Illinois: Has the organization registered to do business in the State of Illinois as a foreign entity? Yes No N/A

1. Select the type of entity you are applying as here. If you are applying as a Not-for-profit corporation, please note that as well
2. If you are a corporation please submit your state of origin (incorporation) here
3. Please select if you are registered with the Illinois Secretary of State to do business in the state

Economic Disclosure Statement Instructions (cont.)

B. IF THE DISCLOSING PARTY IS A LEGAL ENTITY:

- 1.a. List below the full names and titles of all executive officers and all directors of the entity. For not-for-profit corporations, also list below all members, if any, that are legal entities. If there are no such members, write "no members." For trusts, estates or other similar entities, list below the legal titleholder(s).

Name	Title

- 1.b. If you checked "General partnership," "Limited partnership," "Limited liability company," "Limited liability partnership" or "Joint venture" in response to Item A.1. above (Nature of Disclosing Party), list below the name and title of each general partner, managing member, manager or any other person or entity that controls the day-to-day management of the Disclosing Party. **NOTE:** Each legal entity listed below must submit an EDS on its own behalf

Name	Title

1. Fill out this this portion to the best of your ability. Put all Senior Executive members in this field if applicable. If not please put "no members"
2. If your business is a partnership of any kind or joint venture, list all parties involved in this section. If not please put "N/A"

Economic Disclosure Statement Instructions (cont.)

2. Please provide the following information concerning each person or entity having a direct or indirect beneficial interest (including ownership) in excess of 7.5% of the Disclosing Party. Examples of such an interest include shares in a corporation, partnership interest in a partnership or joint venture, interest of a member or manager in a limited liability company, or interest of a beneficiary of a trust, estate or other similar entity whether held in its or their own name or through intermediaries or nominees. If none, click "None." None 1

NOTE: CCC may require any such additional information from any applicant which is reasonably intended to achieve full or additional disclosure of ownership.

2	Name	Business Address	Percentage Interest in the Disclosing Party

1. This section is used to notate any person or entity that owns or has a beneficial interest of more than 7.5% in the corporation. If no person or entity owns or has a beneficial interest of more than 7.5% in the corporation, please select "NONE" in this box
2. Please notate any person or entity that owns or has a beneficial interest of more than 7.5% in the corporation here

SECTION IV -- DISCLOSURE OF SUBCONTRACTORS AND OTHER RETAINED PARTIES

1	Name <small>(Indicate whether retained or anticipated to be retained)</small>	Business Address	Relationship to Disclosing Party <small>(subcontractor, attorney, lobbyist, etc.)</small>	Fees <small>(Indicate whether paid or estimated)</small>

- 2 Check here if the Disclosing party has not retained, nor expects to retain, any such persons or entities.

1. In this section, provide the requested information of any subcontractors or lobbyist you expect to utilize with this matter. You do not have to disclose individuals who are on your regular payroll
2. Select this box if you have not retained or do not intend to retain any such persons or entities.

Economic Disclosure Statement Instructions (cont.)

SECTION V -- CERTIFICATIONS

A. COURT-ORDERED CHILD SUPPORT COMPLIANCE

Substantial owners of business entities that contract with CCC must remain in compliance with their child support obligations throughout the term of the contract.

Has any person who directly or indirectly owns 10% or more of the Disclosing Party been declared in arrearage on any child support obligations by any Illinois court of competent jurisdiction?

1 Yes No No person owns 10% or more of the Disclosing Party.

If "Yes," has the person entered into a court-approved agreement for payment of all support owed and is the person in compliance with that agreement?

Yes No

All of the Contractor's Substantial Owners who directly or indirectly owns 10% or more of the Contractor must remain in compliance with any such child support obligations (1) throughout the term of the contract and any extensions thereof; or (2) until the performance of the contract is completed, as applicable. Failure of Contractor's Substantial Owners to remain in compliance with their child support obligations in the manner set forth in either 1 or 2 constitutes an event of default.

1. You must disclose if any member, who owns more than 10% of your company, is in arrears on their court ordered child support payments and their current status of compliance. If no person owns more than 10% or everyone is in compliance, please select it here

C. FURTHER CERTIFICATIONS

If the Disclosing Party is unable to certify to any of the above statements in Parts V.B. (Certain Offenses Involving CCC and Sister Agencies) or V.C. (Further Certifications), the Disclosing Party must explain below:

1

If the letters "NA," the word "None," or no response appears on the lines above, it will be conclusively presumed that the Disclosing Party certified to the above statements.

1. Please read sections B. CERTAIN OFFENCES INVOLVING CCC AND SISTER AGENCIES and this section carefully. These sections pertain to possible legal proceedings and convictions involving your company and any sister agencies of CCC. Once you have reviewed the sections, please explain the legal proceedings on the form or place "N/A" or "None" to certify you or your company have had no legal proceedings with CCC and its sister agencies

Economic Disclosure Statement Instructions (cont.)

D. CERTIFICATION OF STATUS AS FINANCIAL INSTITUTION

For purposes of this Part D, under the Municipal Code of Chicago ("CMC") Section 2-32-455(b), the term "financial institution" means a bank, savings and loan association, thrift, credit union, mortgage banker, mortgage broker, trust company, savings bank, investment bank, securities broker, municipal securities broker, securities dealer, municipal securities dealer, securities underwriter, municipal securities underwriter, investment trust, venture capital company, bank holding company, financial services holding company, or any licensee under the Consumer Installment Loan Act, the Sales Finance Agency Act, or the Residential Mortgage Licensing Act. However, "financial institution" specifically shall not include any entity whose predominant business is the providing of tax deferred, defined contribution, pension plans to public employees in accordance with Sections 403(b) and 457 of the Internal Revenue Code. (Additional definitions may be found in CMC Section 2-32-455(b).)

1. CERTIFICATION

The Disclosing Party certifies that the Disclosing Party (check one)

is is not

a "financial institution" as defined in Section 2-32-455(b) of the CMC.

2. If the Disclosing Party IS a financial institution, then the Disclosing Party pledges:

"We are not and will not become a predatory lender as defined in Chapter 2-32 of the CMC. We further pledge that none of our affiliates is, and none of them will become, a predatory lender as defined in Chapter 2-32 of the CMC. We understand that becoming a predatory lender or becoming an affiliate of a predatory lender may result in the loss of the privilege of doing business with the CCC.

If the Disclosing Party is unable to make this pledge because it or any of its affiliates (as defined in Section 2-32-455(b) of the CMC) is a predatory lender within the meaning of Chapter 2-32 of the CMC, explain here (attach additional pages if necessary):

2

If the letters "NA," the word "None," or no response appears on the lines above, it will be conclusively presumed that the Disclosing Party certified to the above statements.

1. Please read and select if your business is or is not a financial institution by the definitions found in section D
2. If the disclosing party is a financial institution, please read and certify you will not participate or be associated in predatory lending practices. If this does not apply, place "N/A" or "None" here. If you are unable to make this pledge please submit your explanation as to why here

Economic Disclosure Statement Instructions (cont.)

E. CERTIFICATION REGARDING INTEREST IN CCC BUSINESS

Any words or terms that are defined in CCC Ethics Policy have the same meanings when used in this Part E.

- In accordance with CCC Ethics Policy: To the best of your knowledge after diligent inquiry does any Board Member, official or employee of CCC have a "special interest" in his or her own name or in the name of any other person or entity in the Matter?

Yes **1** No

NOTE: If you checked "Yes" to Item E.1., proceed to Items E.2. and E.3.

If you checked "No" to Item E.1., proceed to E.4.

- Please select yes or no if any employee or board member of CCC has a special interest in this matter. If you select no please proceed to question 4

- Unless sold pursuant to a process of competitive bidding following public notice, no employee or Board member shall have a financial interest in the purchase of any property that belongs to the Board. Before participating in the competitive process, the employee or Board member shall disclose his financial interest.

Does the Matter involve a CCC Property Sale? **1** Yes No

- If you checked "Yes" to Item E.1., provide the names and business addresses of the CCC officials or employees having such interest and identify the nature of such interest:

2 Name	Business Address	Nature of Interest
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

- Please select yes or no if this matter involves the sale of CCC property
- If you selected yes to question 1 please fill out the information for the interested party here

- No employee or spouse of any employee, or entity in which an employee or his or her spouse has a financial interest, has applied for, solicited, accepted or received a loan of any amount from the Disclosing Party, any Applicable Party or any Affiliated Entity; provided, however, that nothing in this section prohibits application for, solicitation for, acceptance of or receipt of a loan from a financial lending institution, if the loan is negotiated at arm's length and is made at a market rate in the ordinary course of the lender's business.

1 Yes No

- If you checked "Yes" to Item E.4., provide the names and addresses of the CCC officials or employees who applied for, solicited, accepted or received such loan:

2 Name	Business Address	Amount of loan
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

- If an employee or spouse or board member has applied and received a loan from the company please select Yes here, if not please select No
- Please write the name of the party(s) that received said loan here

Economic Disclosure Statement Instructions (cont.)

SECTION VI -- ACKNOWLEDGMENTS, CONTRACT INCORPORATION, COMPLIANCE, PENALTIES, DISCLOSURE

CERTIFICATION

Under penalty of perjury, the person signing below: (1) warrants that he/she is authorized to execute this EDS on behalf of the Disclosing Party, and (2) warrants that all certifications and statements contained in this EDS are true, accurate and complete as of the date furnished to the CCC.

(1)

(Name of disclosing Party)

Date: (2)

By: (3)
(sign here)

(4)

(Name of person signing)

(5)

(Title of person signing)

State of _____ County of _____

Signed and sworn to before me on (date) _____, by _____

(6) _____ Notary Public.

Commission expires: _____

1. Please enter the name of your company or individual here
2. Enter the signing date here
3. The company representative signs here
4. Print the name of the representative here
5. The representatives title with the company should go here
6. The public Notary's information goes in this section. An official stamp must be included with their information. All notarized documents must be signed and dated by the notary in order for it to be valid

Economic Disclosure Statement Points of Note

- On page 3 of the EDS, question 2 will ask you to put "None" instead of "N/A", please put what is required
- Answer all questions
- To be valid, the form must be notarized by a public notary

CCC Vendor Application Package Review Steps

- Vendor fills out and submits all documentation to their contact person at City Colleges. The contact person will then send the packet to the procurement department via email at procurementservices@ccc.edu
- Procurement will review documents for accuracy and completeness
- Procurement enters data into our system and informs the submitter of the vendor record number

FAQ's

- **Can a vendor be in the City College of Chicago's system of record before being in business for two full calendar years?** No. All vendors must be in business for two calendar years to be entered into our system of record.
- **Do you accept the Economic Disclosure Statement without it being notarized?** As this is a legal document, City Colleges of Chicago only accepts Economic Disclosure Statements that have been notarized with an official notary seal.
- **My business is registered in a state other than Illinois; do I still have to register with the Illinois Secretary of State?** Yes, City Colleges of Chicago requires all vendors to be registered with the Illinois Secretary of State regardless of state of origin.
- **How long does it normally take Procurement to process a new vendor request?** If Procurement receives the required documents and they have been filled out correctly and are in order, it can take up to 5 business days to process your request. But most requests are processed within 48 - 72 hours of COMPLETE CORRECT submission.
- **Does City Colleges of Chicago accept digital signatures for their documents?** Currently, City Colleges of Chicago does not accept digital signatures for its documents. All documents submitted must be wet-signed with ink before submission.
- **Can I submit the vendor application under my business name and for the W 9 section use my individual information?** No, all forms in the packet must match in name and associated information including address, phone numbers, and tax ID's.
- **My business recently changed names due to an acquisition. Can I submit a vendor application with the company's old information?** No, you must submit the company's new name and tax information. When a company has been acquired or has gone through some major change, City Colleges of Chicago requires the vendor to submit all legal documents concerning the reason for the change along with the vendor package.
- **My Vendor packet was denied due to my company not being in business for two years. Do I have to resubmit a new packet, or can I use the packet I submitted previously when my company reaches two years?** As long as the notary seal is still valid and the W-9 is less than a year old, you can resubmit the current packet.