M/WBE SUBCONTRACTORS AND SUPPLIERS NOTICE OF INTENT TO PARTICIPATE

	y the Bidder/Contractor. Parts B & C of this form must be completed by MBE and/or WBE rate M/WBE Notice of Intent to Participate form for each MBE or WBE as part of the proposal.
Bidder Name:	Federal ID No.:
Address:	Phone No.:
City State	Zip Code E-mail:
Signature of Authorized Representative of Bidder's Firm	Print or Type Name and Title of Authorized Representative of Proposer's Firm
Date: PART B - THE UNDERSIGNED INTENDS TO PROVIDE SERVI	CES OR SUPPLIES IN CONNECTION WITH THE ABOVE PROCUREMENT:
Name of M/WBE:	Federal ID No.:
Address:	Phone No.:
City, State, Zip Code	E-mail:
BRIEF DESCRIPTION OF SERVICES OR SUPPLIES TO BE PERF	ORMED BY MBE OR WBE:
DESIGNATION:MBE SubcontractorWBE Subco	ontractor MBE SupplierWBE Supplier
	k State Division of Minority and Women-Owned Business Development (MWBD).
	R SUPPLIES AS DESCRIBED ABOVE AND WILL ENTER INTO A FORMAL AGREEMENT CUTION OF A CONTRACT WITH THE NEW YORK STATE EDUCATION DEPARTMENT.
The estimated dollar amount of the agreement \$	Signature of Authorized Representative of M/WBE Firm
Date	Printed or Typed Name and Title of Authorized Representative