**REQUEST TO BE INCLUDED ON THE**

**PROFESSIONAL SERVICE ROSTER**

**WASHINGTON STATE SCHOOL DIRECTORS’ ASSOCIATION (WSSDA)**

221 College Street NE, Olympia, WA 98516

PHONE: (360) 252.3012

FAX: (360) 252.3022

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| *FOR CONSIDERATION ON SPECIAL PROFESSIONAL SERVICES PROJECTS*  *COMPLETE THIS FORM AND MAIL TO THE ABOVE ADDRESS.* |

Name of Company Phone #

Address Fax #

City State Zip E-mail

Name of Contact Person

Federal Tax Identification Number:

Type of Organization: [ ] Individual [ ] Partnership [ ] Corporation

List principals: (owners, partners, corporate officers)

Name & Title

Name & Title

Name & Title

Are any of the Principals or their spouses employed by WSSDA?

( ) Yes ( ) No

How long has your company been in business?

**PREVIOUS EXPERIENCE -** List other School Districts or State agencies:

District/Agency Description of Service Date Performed Amount

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| --- |
| *WASHINGTON STATE SCHOOL DIRECTORS’ ASSOCIATION IS AN EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION EMPLOYER. Applicant will comply with all City, State and Federal Government regulations regarding equal employment opportunity and affirmative action.* |

Mark with an X those services you are equipped, experienced and qualified to perform:

|  |  |  |  |
| --- | --- | --- | --- |
| [ ] | Architecture | [ ] | Engineering Structural |
| [ ] | Architecture, Landscaping | [ ] | Engineering, Traffic/Transportation |
| [ ] | Asbestos Abatement Consultant | [ ] | Engineering, Value |
| [ ] | Construction Testing | [ ] | Environmental Monitoring |
| [ ] | Cost Estimating: | [ ] | Hazardous Waste Services |
| [ ] | · Roofing | [ ] | Inspection Services |
| [ ] | · Commissioning HVAC Systems | [ ] | Survey |
| [ ] | · A.D.A. Upgrades | [ ] | Testing & Balance of HVAC |
| [ ] | · Constructability Reviews | [ ] | Testing & Concrete |
| [ ] | Engineering, Civil | [ ] | Testing, Soil |
| [ ] | Engineering, Electrical | [ ] | Other : |
| [ ] | Engineering, Geo-Technical | [ ] |  |
| [ ] | Engineering, Mechanical | [ ] |  |
| [ ] | Engineering, Signal Systems | [ ] |  |

Comments or explanations, if any, on areas of specialization:

Applicant agrees to provide a Certificate of Insurance naming the Washington State School Directors’ Association as an additional insured, prior to commencement of any project.

Applicant agrees to comply with all City, State and Federal regulations relative to public works projects.

I certify that the information supplied herein is correct and agree to the terms and conditions contained herein.

Signature Date

Printed Name Title