



COMMUNITY CONSOLIDATED SCHOOL DISTRICT 157-C

Contractor Background Questionnaire and Information

This information must be completed in its entirety from every bidder responding to this *Invitation for Bid and Contract*.

Contract Name: _____

Address: _____

Contact: _____

Telephone Number: _____

Email Address: _____

Fax Number: _____

Is your company wholly-owned? If not, identify parent company: _____

Gross sales from last fiscal year: _____

Total number of Public School Auditing contracts in Cook, Will, Kendall and Grundy counties: _____

Where is your company headquarters located: _____

Is your company an equal opportunity employer? _____

How many total employees does your company have? _____

Company annual revenue for fiscal year 2017: _____



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Company annual revenue for fiscal year 2016:

Company annual revenue for fiscal year 2015:

Will you serve as the primary Contractor and take responsibility for coordinating the efforts of any/all third parties?

If the Contractor is proposing to use a subcontractor on this project, please provide background information on the subcontractor, contractor relationship with that firm and the specific services that the subcontractor will be providing on the project. A complete list of subcontractors is required.

The District has the right to approve all subcontractors of the Contractor at any time.

Please provide descriptions of the services proposed, including staffing descriptions and key assumptions.

Please indicate what training is provided to your staff.

Type:

Annual hours:

Please suggest any areas in which you foresee potential cost savings to the School District and identify what those savings would be.

Print Name

Signature

Date

Contractor