



Vendor View for Vendor Registration



Step 1: Apply for Registration



[OUR MAIN SITE](#)

[CONTACT SUPPORT](#)



Vendor Registration

Search and/or join our database of registered vendors

[Search Registered Vendors](#)

[Apply for Registration](#)

System Training

Learn how to fully utilize our system with a live trainer

[Training](#)

About the System

Learn more about this system and how it works today

[Information for Vendors](#)

Outreach

Opportunities for vendor involvement

Step 2: New Registration or Renew / Update Registration

Apply for Registration

Thank you for your interest in doing business with Atlanta Public Schools (APS)!

Using the Business Diversity Management System, the registration process takes only a couple of minutes. After registering your company, you will automatically be logged into the system and directed to complete our vendor registration application.

All firms interested in doing business with APS are encouraged to complete our vendor registration application and attach all required documentation as applicable. Benefits of registration include the ability to receive notification of upcoming workshops, conferences, seminar, and procurement opportunities.

APS vendors are welcome to view procurement opportunities on a regular basis.

To continue, please select an option below.

New Registration

Your firm is not currently registered.
[Create Account](#)

I Forgot My Username & Password.
[Lookup Account](#)

Renew or Update Your Registration

I Know My Username & Password
[Login](#)

I Forgot My Username & Password
[Lookup Account](#)

If you require technical assistance while completing the application, please use our [online support form](#).

System Access Login

Username

[FORGOT USERNAME / ACCOUNT LOOKUP](#)

Password

[FORGOT PASSWORD](#)

Remember Username

Login

Vendor Registration

System Training

Step 3: Filling out the Vendor Registration

Vendor will complete the following registration. Questions mark with a red * are required and must be completed.

Vendor Registration: Edit Questionnaire

Thank you for your interest in doing business with Atlanta Public Schools (APS). Your company can be added to the APS vendor database by completing the registration form and providing all required documents.

Please note, the APS district does not maintain an "Approved Vendors List." Any vendor wishing to submit a response to a solicitation may do so without previously being entered into our vendor database.

Applicable documents regarding the Georgia Security and Immigration Compliance Act, as amended, Act OCGA 13-10-90 et. Seq., attached, must be submitted with registration.

Due to the large number of vendors included in APS district database, not all vendors will necessarily be sent an announcement each time a solicitation is issued. Invitations for Bid and Requests for Proposal issued by the APS district are advertised on Procurement Services web site and can be accessed by [clicking here](#).

It is the vendor's responsibility to review the APS web site frequently for a listing of open solicitations. To view on the Internet, go to <https://www.atlantapublicschools.us/>. Select "Departments and Services", choose "Procurement" and find the link to Outstanding Solicitations on the left side of the page.

* required entry

Vendor Registration	
NAME	APS Vendor Registration
DESCRIPTION	This Vendor Registration Form is for all firms with an interest in doing business with Atlanta Public Schools. In order to become a registered vendor you must complete and submit the vendor registration form, W-9 and the appropriate Affidavit form for "Illegal Immigration Reform and Enforcement Act of 2011"—only one affidavit is required.

Entity Information	
CONTACT FOR THIS SUBMISSION *	<input type="text" value="A Testing"/>
	Select a contact person for this record; all notices will be sent to this person.
TAX ID NUMBER *	<input type="text"/> <small>(9 digit Federal Tax ID; firms are strongly encouraged not to use SSN as the tax ID. Tax ID Numbers can be easily obtained from the IRS at no charge.)</small>
COMPANY TYPE *	<input type="text" value="Corporation"/>
PHYSICAL ADDRESS *	Address <input type="text"/> <input type="text"/> <input type="text"/>
	City <input type="text"/>
	U.S. States/Provinces or Canadian Provinces <input type="text" value="U.S. States/Provinces"/> or <input type="text" value="Canadian Provinces"/>

MAILING ADDRESS *

Address

City

U.S. States/Provinces or Canadian Provinces

U.S. Zip Code or Canadian Postal Code

 -

Country

FINANCIAL INFORMATION

REMIT-TO ADDRESS *

Provide your remit-to address for payment.

PROVIDE YOUR PREFERRED EMAIL ADDRESS FOR RECEIVING PURCHASE ORDERS. *

 Format as name@example.com

PRIMARY CONTACT INFORMATION

PHONE NUMBER *

 Format as ###-###-####

MOBILE PHONE NUMBER *

 Format as ###-###-####

FAX NUMBER

 Format as ###-###-####

BUSINESS INFORMATION

ARE YOU A 1099-RECIPIENT? *

- No
 Yes

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	W-9 Tax form	Document is REQUIRED - You must provide a Federal Tax ID number or a Social Security number on a W-9 Tax form.	<input type="button" value="Download"/>	Not Attached
<input type="button" value="Attach"/>	Certificate of Insurance	Independent contractors may elect to submit a current Certificate of Insurance		NOT attached

ARE YOU OR ANY MEMBER OF YOUR FAMILY AN EMPLOYEE OF APS? *

- No
 Yes

If yes, please provide the relationship, name and position of the APS employee(s):

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Conflict of Interest Form	Document is REQUIRED - Download, complete and submit an APS Conflict of Interest Form	<input type="button" value="Download"/>	Not Attached

HAVE YOU READ GEORGIA'S HOUSE BILL 87 (O.C.G.A. §13-10-91, AS AMENDED), ALSO KNOWN AS THE "ILLEGAL IMMIGRATION REFORM AND ENFORCEMENT ACT OF 2011" *

You must read the "Illegal Immigration Reform and Enforcement Act of 2011" and submit the necessary forms. Language of the bill can be found by [clicking here](#).

- No
 Yes

SELECT THE VENDOR CLASSIFICATION THAT BEST DESCRIBES YOUR INTERESTED ENGAGEMENT WITH APS. *

- Contractor

If selected, you **MUST** submit a completed, signed and notarized Contractor Affidavit of Compliance.

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Contractor Affidavit of Compliance under O.C.G.A. § 13-10-91(b) (I)	Document is REQUIRED when option is selected - Download, complete, sign and notarize a Contractor Affidavit of Compliance.	<input type="button" value="Download"/>	Not Attached

- Subcontractor

If selected, you **MUST** submit a completed, signed and notarized Subcontractor Affidavit of Compliance.

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Subcontractor Affidavit of Compliance under O.C.G.A. § 13-10-91(b) (3)	Document is REQUIRED when option is selected - Download, complete, sign and notarize a Subcontractor Affidavit of Compliance	<input type="button" value="Download"/>	Not Attached

- Sub-subcontractor

If selected, you **MUST** submit a completed, signed and notarized Sub-subcontractor Affidavit of Compliance.

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Sub-subcontractor Affidavit of Compliance under O.C.G.A. § 13-10-91(b) (4)	Document is REQUIRED when option is selected - Download, complete, sign and notarize a Sub-subcontractor Affidavit of Compliance	<input type="button" value="Download"/>	Not Attached

None of the above

If selected, you **MUST** submit a completed, signed and notarized Affidavit of Exception **AND** a copy of your State of Georgia driver's license.

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Affidavit of Exception (No Employees)	Document is REQUIRED when option is selected - Download, complete, sign and notarize an Affidavit of Exception	<input type="button" value="Download"/>	Not Attached
<input type="button" value="Attach"/>	State of Georgia driver's license	Document is REQUIRED when option is selected - Submit a copy of your State of Georgia driver's license.		Not Attached

ADDITIONAL BUSINESS INFORMATION (FOR DATA PURPOSES ONLY)

PLEASE PROVIDE THE COMPANY OWNER'S ETHNICITY. *

If there are multiple owners, select the ethnicity of 50% or more of the owners.

- Asian
- Asian Indian
- Asian Pacific
- Black
- Caucasian
- Hispanic / Latino
- Native American
- Other

DOES 50% OR MORE OF YOUR COMPANY'S OWNERSHIP CONSIST OF WOMEN? *

- No
- Yes

IDENTIFY YOUR COMPANY'S CERTIFIED DIVERSITY CLASS (MWBE) IF APPLICABLE. *

Select all that apply.

African American

Provide the certifying agency:

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Certificate or Letter of Certification from a MWBE Certifying Agency	Document is REQUIRED when option is selected - Upload copy of Certificate or Letter of Certification		Not Attached

Asian American

Provide the certifying agency:

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Certificate or Letter of Certification from a MWBE Certifying Agency	Document is REQUIRED when option is selected - Upload copy of Certificate or Letter of Certification		Not Attached

Hispanic American

Provide the certifying agency:

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Certificate or Letter of Certification from a MWBE Certifying Agency	Document is REQUIRED when option is selected - Upload copy of Certificate or Letter of Certification		Not Attached

Native American

Provide the certifying agency:

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Certificate or Letter of Certification from a MWBE Certifying Agency	Document is REQUIRED when option is selected - Upload copy of Certificate or Letter of Certification		Not Attached

Female

Provide the certifying agency:

Attach	Document	Instructions	Download Form	Status (refresh)
<input type="button" value="Attach"/>	Certificate or Letter of Certification from a MWBE Certifying Agency	Document is REQUIRED when option is selected - Upload copy of Certificate or Letter of Certification		Not Attached

Not Applicable.

Commodity Codes

ASSIGNED COMMODITY CODES *

Click the **Add Commodity Codes** button to lookup and add commodity codes to the list that represent the products and/or services provide by the business.

No Codes Assigned

If you have missed a section in the document or forgot to attach a required document (if applicable) the system will not let you proceed. The system will identify what sections need to be updated.

After all items have been completed and all required documentation (if applicable) attached, you will be able to sign the vendor registration and submit.

The undersigned certifies under oath that the information provided herein is true and sufficiently complete so as not to be misleading.

Signature Edit

Apply your signature in the box below using your mouse, finger, or stylus

SIGNATURE *

Clear Signature

YOUR NAME *
Type your full, legal name

YOUR TITLE *

YOUR ORGANIZATION *

TODAY'S DATE *
11/9/2021

You must accept the terms of this agreement in order to register as a vendor with APS. By submitting the vendor registration forms, you certify and warrant that you are duly authorized, by the vendor to (1) register the vendor; (2) file on behalf of the vendor all of the information requested in this registration process; and (3) enter into this agreement on behalf of the vendor. By submitting this electronic vendor registration, you hereby agree on behalf of the vendor and for the benefit of each agency and public body that:

1. The vendor shall use APS vendor registration update functionality to update the vendor's registration information whenever necessary to ensure that the registration information remains accurate and up to date at all times.
2. The vendor hereby warrants that the information provided by the vendor through the APS registration process shall at all times be accurate, complete and up to date. The vendor further warrants that each agency and public body shall be entitled at all times to rely conclusively on the currency, accuracy and completeness of the information the vendor has provided through the APS registration process as of that date even if different information is or has been available to or received by agency or public body personnel through means other than the APS registration process.
3. I agree that **(a)** I am a U.S. person (including a U.S. resident alien) or a representative of a U.S. entity; and **(b)** the number shown on this form is the correct taxpayer identification number for my/our organization. This agreement shall remain in effect for as long as the vendor is registered as an APS vendor. ALL RIGHTS RESERVED TO CANCEL THE VENDOR'S REGISTRATION AT ANY TIME. In the event the vendor's registration is cancelled, the vendor shall remain bound to this agreement in regard to completion of any contract, purchase order or other electronic procurement transaction that was made or administered in whole or in part using APS.
4. I understand and agree that my company must follow all applicable APS COVID-19 safety protocols when present on APS property and interacting with APS staff or students. These protocols are subject to change due to the rapidly evolving needs of APS during the COVID-19 pandemic, but may include mask requirements, social distancing, and participation in a surveillance COVID-19 testing program, if required by APS. The current COVID-19 safety protocols are available at: <https://www.atlantapublicschools.us/Page/66740>

Edit Submit Cancel