

VENDOR SELECTION FORM

For Requisition Number R _____

This form is required and must be submitted to the Purchasing Department for every requisition of \$2,500 or more. All sections are to be completed. Fill in the requested information and check the appropriate boxes.

Date: / /20__	Requisitioner's Name:	Department:	Total amount of order: \$
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- If the requisition totals **\$25,000 or more**, you must have **3 Written Proposals** available for audit review. These must be retained in your department for seven 7 years per Record and Email Retention policy - Q.4. issued 08/07.
- Requisitions totaling between **\$2,500 and \$25,000** are subject to Competitive Bid requirements. Unless exempted from competitive bidding, you must get at least **three quotes**.

If the order is for over \$100,000, Check One:

<input type="checkbox"/> Contract is non-standard and has been reviewed by IIT General Counsel Date of review: / / 20__	<input type="checkbox"/> Contract is made using an approved IIT standard construction or consulting form.	<input type="checkbox"/> Purchase is of a standard nature and should be made using the IIT purchase order terms and conditions.
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Name of IIT person who obtained the quotes: _____ Name

OR, quotes were gathered by others:

quotes were gathered by: <input type="checkbox"/> Communications & Marketing	<input type="checkbox"/> Purchasing	<input type="checkbox"/> Other: _____
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Item/Service Description:

Competitive quote information (List the three most competitive quotes received):

Vendor Name	Quote number	Quote Date	Quote is: (circle one)	Total delivered price quoted	Comments
		/ /	W V I	\$	
		/ /	W V I	\$	
		/ /	W V I	\$	

(W) Written Quote (V) Verbal Quote (I) Internet Quote

Name of Vendor Selected:	
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If competitive bids were not gathered, indicate why:

<input type="checkbox"/> Emergency order	<input type="checkbox"/> Sole Source (there is no other provider available)	<input type="checkbox"/> Competitive bidding is disadvantageous to IIT	<input type="checkbox"/> Vendor is on IIT Approved Vendor List	<input type="checkbox"/> Specific Professional or Artistic Skill Required
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Explanation of reason checked:

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Print Your Name:	Sign Your Name:	Date: / /20__
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By signing this form you are affirming that IIT Purchasing Policy has been followed and that records have been retained and are on file in your department and available for future audit.