

2020 ICUF Preferred Vendor Application

Independent Colleges and Universities of Florida (ICUF)

ICUF is a diverse association of 30 private, not-for-profit, educational institutions, all based in Florida. We serve more than 156,000 students, at 140 educational sites with more than 600 on-line programs in Florida.

Our enrollments represent one-third of the students attending 4 year, SACS accredited institutions in Florida.

Join our **Preferred Vendor Program** to promote your involvement with our campuses (by offering your services and products) and to develop mutually beneficial partnerships and opportunities (by supporting and working) with our Florida private colleges and universities.

1) COMPANY INFORMATION:

Name of Company

Mailing Address

Website Address

2) DESCRIPTION OF COMPANY AND CONTACT(S) - (to be displayed on our website):

(50 words or less, including products or services provided. The description may also include: number of higher education clients served; number of employees; length of time in business; and area(s) of specialty.)

3) Contact Information:

(Complete the following information for **up to two people** you wish to be listed as contacts in our Preferred Vendor Directory on our website: Additional contacts may be listed at a cost of \$50 each; add a page with same information.)

Primary Organizational Contact

Name (Select One - Dr. /Mr./ Mrs./ Ms./ Miss)

Title

Complete Address

(If different than address in 1):

Phone

Fax

E-mail



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Second Organizational Contact

Name (Select One - Dr. /Mr./ Mrs./ Ms./ Miss) _____
Title _____
Complete Address _____
(If different than address in 1): _____
Phone _____
Fax _____
E-mail _____

4) ICUF SCHOOL AFFILIATION:

(List which ICUF institution(s) are you **doing business with currently**, or if previously, give a year and contact at the school.)

5) SCHOOL CONNECTION:

(List who or which office on campus are you most interested in being linked to for your business model.)

6) SUBMIT THE APPLICATION AND \$1,250 FEE:

Email the Application to (Traci Ray) tray@icuf.org, or Fax to (850) 681-0057

Payment: Check- (Payable to "ICUF") mail to:

ICUF
542 East Park Avenue
Tallahassee, FL 32301

Applicant Signature

Application Date