



**Texarkana**  
Independent School District

## **VENDOR LIST APPLICATION FORM**

This application form is intended to facilitate identifying qualified vendors that desire to be considered for business opportunities with Texarkana Independent School District through the competitive procurement process. Please fill out the information requested below and return to:

Texarkana ISD  
Attn: Purchasing  
4241 Summerhill Rd.  
Texarkana, TX 75503

OR

**Fax:** 903.792.2632  
Attn: Purchasing

**Email:** [angel@txkisd.net](mailto:angel@txkisd.net)

Vendor Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

Vendor Address City, State and Zip: \_\_\_\_\_

Vendor Contact Person & Title: \_\_\_\_\_

Vendor Phone Number: \_\_\_\_\_

Vendor Fax Number: \_\_\_\_\_

Vendor Email: \_\_\_\_\_

Authorized Agent Name: \_\_\_\_\_

Type of Business (Small, Women, Minority HUB): \_\_\_\_\_

Commodity Listing (be specific): \_\_\_\_\_

***Submittal of this vendor application is for the convenience of the Purchasing Department only and does not imply or guarantee to the submitter the receipt of any information (bid or quote requests, etc.)***