

**NEW JERSEY SCHOOLS DEVELOPMENT AUTHORITY
SBE FORM A - SCHEDULE OF SBE PARTICIPATION**

CONTRACT NO: _____

SCHOOL NAME: _____

PRIME FED ID NO: _____

CONTRACT AMT: \$ _____

MUNICIPALITY: _____

DATE OF AWARD: _____

Name of SBE Contractor/Consultant	** MBE	** WBE	Address, Telephone Number & Contact Person	Type of Work Performed (Electrical, HVAC, Structural, etc.)	Subcontract Amount	Projected		% of Total Contract
						Start Date	End Date	
TOTALS					\$			

PRIME (Print Name)

PREPARED BY:

PRIME'S SBE LIAISON (Print Name)

PRIME'S ADDRESS

SIGNATURE & TITLE

TELEPHONE (Include Area Code)

E-MAIL ADDRESS

NOTE: As the Prime of this contract you have a responsibility to meet the following SBE goals: A minimum of 25%

Pursuant to Executive Order #34, NJSDA is currently monitoring minority/woman-owned participation on all construction and goods and services contracts.

Please note, if any of the named subcontractors/subconsultants are a minority or woman owned firm, as well as an SBE, indicate this where appropriate.

** MBE/WBE **B**: Black **H**: Hispanic **A**: Asian **N**: Native American **W**: Woman *****Identity of race and gender is voluntary and not required**