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| Project Name: | Annual Announcement | | |
| Project No. |  | Contract No. |  |

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| **For the Contractor and each Subcontractor indicated on the Report of Subcontractor Information, the following must be completed. Indicate all Business category(ies) that apply by checking the box next to the applicable category(ies), providing the Certification Agency and Certification Number along with attached proof of certification.:** |

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| **Small Business Enterprise (SBE)** - an independently owned and operated concern certified as a small business by the California Department of General Services Office of Small Business and Disabled Veteran Business Enterprise Services (OSDS) or other accepted certifying agency as listed here. [**https://ucop.edu/sbe-dvbe-certifications**](https://ucop.edu/sbe-dvbe-certifications)  Certifying Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Certification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Attach documentation of certification to this form) |
| **Disabled Veteran Business Enterprise (DVBE)** - an independently owned and operated concern certified as a DVBE by the State of California Office of Small Business and Disabled Veteran Business Enterprise Services (OSDS) or other accepted certifying agency as listed here. [**https://ucop.edu/sbe-dvbe-certifications**](https://ucop.edu/sbe-dvbe-certifications)  Certification Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Certification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Attach documentation of certification to this form) |

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| |  | | --- | | ***The below information is being collected post-award for statistical purposes only. Please check all Business category(ies) that apply:*** | | **Disadvantaged Business Enterprise (DBE)** - a business concern that is at least 51% owned by one or more socially and economically disadvantaged individuals or, in the case of any publicly owned business, at least 51% of the stock of which is owned by such individuals and whose management and daily business operations are controlled by one or more of such individuals. Socially disadvantaged individuals are those who have been subjected to racial or ethnic prejudice or cultural bias because of their identity as members of a group without regard to their individual qualities. Economically disadvantaged individuals are those socially disadvantaged individuals whose ability to compete in the free private enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same business area who are not socially disadvantaged. Business owners who certify that they are members of named groups (Black Americans, Hispanic Americans, Native Americans, Asian-Pacific Americans, Asian-Indian Americans) are to be considered socially and economically disadvantaged. | | **Women-Owned Business Enterprise (WBE**) - a business concern that is at least 51% owned by a woman or women who also control and operate it. “Control” in this context means exercising the power to make policy decisions. “Operate” in this context means being actively involved in the day-to-day management. | |

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| **None of the above categories apply** |

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| I hereby certify under penalty of perjury under the laws of the State of California that I have read this certification and know the contents thereof, and that the business category indicated above reflects the true and correct status of the business. I understand that falsely certifying the status of this business, may result in suspension from participation in University of California business contracts for a period up to five (5) years and the imposition of any civil penalties allowed by law. | | | | |
| **INFORMATION FURNISHED BY:** | |  | | |
|  | | *(Print or Type Name of Owner and/or Principal)* | | |
|  |  | | | |
|  | *(Name of Business or Firm)* | | | |
| a |  | | | |
|  | *(Insert type of business e.g. corporation, sole proprietorship, partnership, etc.)* | | | |
| By: |  | |  |  |
|  | *(Signature)* | |  | *(Title)* |
|  |  | |  |  |
|  | *(Print Name)* | |  | *(Date)* |

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| **PRIVACY NOTICE**  The State of California Information Practices Act of 1977 (effective July 1, 1978) requires the University of California to provide the following information to individuals who are asked to supply personal information about themselves. Information furnished on the Self-Certification form may, in some cases, identify personal information of an individual.   * The University of California, Irvine, is requesting the information contained in this form and the accompanying Report of Subcontractor Information. * The Small Business Outreach Program Manager at the University of California, Irvine, is responsible for maintaining the requested information. The contact information for the Small Business Outreach Program Manager may be found at: http://www.ucop.edu/procurement-services/\_files/sbdmgr.xlsx * The maintenance of information is authorized in part by Public Contract Code section 10500.5. * Furnishing the information requested on this form is mandatory. If SBE, DBE, WBE and/or DVBE status is applicable, furnishing such information is mandatory. * Failure to provide the information may be a violation of bidding procedures and/or breach of the contract and the University may pursue any and all remedies permitted by the provisions of the Contract Documents. * The information on this form is collected for monitoring and reporting purposes in accordance with state law and University policy. * The individual may access information contained in this form and related forms by contacting the Small Business Outreach Program Manager(s). |