



Tolowa Dee-ni' Nation Education Department

300 Dat-naa-svt Loop, Smith River CA 95567

Tel: (707) 487-9255 Ext 1154 or 1550

ACE Vendor Interest Form

Contact Information

First Name _____

Last Name _____

Address _____

City/State/Zip _____

Phone _____ Alt Phone _____

Email _____

Contractor Information

Business Name _____

Business Address _____

Business Phone _____

Business Email _____

Contract # (EIN) _____

OR Social Security Number _____

Tribal Affiliation _____

Disclaimers

- ***All Vendors are Subject to Completing and Passing Background Checks***
- ***This is a Drug & Alcohol-Free Environment***
- ***Subject to Contract Approval***



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Vendor Skills Bank

If you would like to be added to our Vendor Skills Bank that will be shared throughout Tolowa Dee-ni' Nation please list the services/ skill set you are interested in providing.



What service/ skill set are you interested in providing?

Please describe your plan to deliver service(s) (Please include practices and protocols):

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ACE Vendor Interest Form

Preferences of Students Serving *(Choose All That Apply)*

Gender Preference: ☐ Female ☐ Male Age Preference: ☐ 5-8 ☐ 9-12 ☐ 13-18

Service Details

Materials Included: ☐ Yes ☐ No If no, please provide a list of materials needed.

Activity Site Included: ☐ Yes ☐ No Activity Site Needed: ☐ Yes ☐ No

Please check the ways in which you are willing to teach *(choose all that apply)*

☐ In-Person Sessions ☐ Video ☐ Virtual Sessions (i.e. Zoom)

Cost Breakdown Information

Per Hour _____

Per Student _____

Per Group/ Event _____

Max # of Students _____

of Sessions per Activity _____

Hours Per Session _____

☐ Opt. in as a Volunteer

If you have any questions or wish to return form, please email to:

Tara Lopez @ tara.lopez@tolowa.com or

Jalea Walker @ jalea.walker@tolowa.com or

Chvski Scott @ chuski.scott@tolowa.com

Return by mail to: 12801 Mouth of Smith River, CA. 95567

Or drop off at: 300 Dat-naa-svt Loop, Smith River CA. 9556

FOR OFFICIAL USE ONLY Date Received: _____ Form Complete: ☐ Yes ☐ No

☐ Need more info. _____

Date Processed: _____ Contract # _____ Staff Initials: _____



What service/ skill set are you interested in providing?

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