

State of Illinois Commission on Equity and Inclusion Business Enterprise Program 100 W. Randolph St., Suite 4-100, Chicago, IL 60601 312-814-4190 www.cei.illinois.gov

Higher Education Supplier Diversity Report

With the passage of <u>Public Act 100-0140</u>, Every private institution of higher education approved by the Illinois Student Assistance Commission for purposes of the Monetary Award Program shall submit a 2-page report on its voluntary supplier diversity program now the Commission on Equity and Inclusion.

Please use this form to complete your report and submit to the Business Enterprise Program by emailing to CEI.BEP.Compliance@illinois.gov with the subject line, "Fiscal Year ## Higher Ed Supplier Diversity Report".

Institution Name:			
Institution Address:			
City:			Zip:
•	ontact for the supplier dive information for the institut		. If there is no supplier diversity ment program.
Name:			
Address:			
City:	State:		Zip:
Phone Number:		Email:	
	state certifications that the n-owned, or veteran-owne		
1		6	
2		7	
3		8	
4		9	
5.		10.	



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This report submission covers (please enter either the fiscal year or calendar year): Fiscal Year: Calendar Year: The institution's total budget for the period (expending both public and private monies, including any fee-supported entities): Complete the below for the entire budget of the institution (expending both public and private monies, including any fee-supported entities) (the entire budget for the institution is the denominator to calculate the % of total columns). List the total spend across all commodity codes with M/W/VBE Vendors: Goal Percentage Spend with M/W/VBE Vendors Goal Spend with M/W/VBE Vendors (total dollars): (% of total): _____ Actual Spend with M/W/VBEs Actual Spend with M/W/VBE Vendors (total dollars): (percent of total): Complete the below for the commodity code or description of goods/services for the 5 categories in which your institution had the highest aggregate spend with M/W/VBE Vendors. List the total spend across all 5 categories with M/W/VBE Vendors: Category 1: NIGP / NAICS / Description: Goal Spend with M/W/VBE Vendors Goal Percentage Spend with M/W/VBE Vendors (% of total): _____ (total dollars): Actual Spend with M/W/VBE Vendors Actual Percentage Spend with M/W/VBE Vendors (total dollars): _____ (% of total): _____ Category 2: NIGP / NAICS / Description: _____ Goal Spend with M/W/VBE Vendors Goal Percentage Spend with M/W/VBE Vendors (total dollars): (% of total): _____



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Actual Spend with M/W/VBE Vendors (total dollars):	Actual Percentage Spend with M/W/VBE Vendors (% of total):		
Category 3: NIGP / NAICS / Description:			
Goal Spend with M/W/VBE Vendors (total dollars):	Goal Percentage Spend with M/W/VBE Vendors (% of total):		
Actual Spend with M/W/VBE Vendors (total dollars):	Actual Percentage Spend with M/W/VBE Vendors (% of total):		
Category 4: NIGP / NAICS / Description:			
Goal Spend with M/W/VBE Vendors (total dollars):	Goal Percentage Spend with M/W/VBE Vendors (% of total):		
Actual Spend with M/W/VBE Vendors (total dollars):	Actual Percentage Spend with M/W/VBE Vendors (% of total):		
Category 5: NIGP / NAICS / Description:			
Goal Spend with M/W/VBE Vendors (total dollars):	Goal Percentage Spend with M/W/VBE Vendors (% of total):		
Actual Spend with M/W/VBE Vendors (total dollars):	Actual Percentage Spend with M/W/VBE Vendors (% of total):		

Lastly, include a narrative (on your institution's letterhead) explaining the results of the report and the tactics to be employed to achieve the goals.