NOTE: Failure to submit the required forms will result in your bid proposal being deemed non-responsive.

MARYLAND JUDICIARY

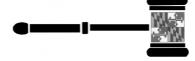## SCHEDULE FOR PARTICIPATION OF MINORTY BUSINESS ENTERPRISES

1. PRIME CONTRACTOR - NAME OF FIRM - ADDRESS (Number, Street, City, State, Zip)   TELEPHONE: Area Code (   )

2. PROJECT LOCATION (NUMBER, STREET, CITY, STATE, ZIP)

3. PROJECT NUMBER: _____

4. LIST THE DATA REQUESTED FOR EACH MINORITY FIRM INVOLVED IN THIS PROJECT:

a. MINORITY FIRM: _____
— —
(Name of Firm)   (Number)   (Street)   (City)   (State)   (Zip)

Certification No. _____   Telephone No. _____

Work or Service to be performed:
— —

Project Commitment Date: Project Completion Date:
— —

Percentage of Total Contract: _____ %

b. MINORITY FIRM: _____
— —
(Name of Firm)   (Number)   (Street)   (City)   (State)   (Zip)

Certification No. _____   Telephone No. _____

Work or Service to be performed:
— —

Project Commitment Date: Project Completion Date:
— —

Percentage of Total Contract: _____ %

c. MINORITY FIRM: _____
— —
(Name of Firm)   (Number)   (Street)   (City)   (State)   (Zip)

Certification No. _____   Telephone No. _____

Work or Service to be performed:
— —

Project Commitment Date: Project Completion Date:
— —

Percentage of Total Contract: _____ %

d. MINORITY FIRM: _____
— —
(Name of Firm)   (Number)   (Street)   (City)   (State)   (Zip)

Certification No. _____   Telephone No. _____

Work or Service to be performed:
— —

Project Commitment Date: Project Completion Date:
— —

Percentage of Total Contract: _____ %

5. MINORITY FIRMS TOTAL PERCENTAGE _____ %

6. REMARKS: (Use Plain Bond for Additional Comments):

THIS FORM PREPARED BY: _____
(First)   (Middle Initial)   (Last)   (Title)

DO NOT WRITE BELOW THIS LINE - **JUDICIARY USE ONLY**

7. APPROVED   ☐ YES   ☐ NO

_____   _____
DATE   SIGNATURE - ADMINISTRATION - MINORITY BUSINESS ENTERPRISE OFFICER

NOTE: If the Minority Contractor Project Disclosure and Participation Statement is submitted after Bid opening, a copy of the conditional contract with each Minority Business Enterprise must be submitted with statement and schedule for participation.

FORM MJ-EEO-003 03/2010

ADMINISTRATION COPY

NOTE: The required MBE forms must be submitted with your technical proposals/bid.

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MARYLAND JUDICIARY

MINORITY CONTRACTOR PROJECT DISCLOSURE AND PARTICIPATION STATEMENT

1. PRIME CONTRACTOR - NAME OF FIRM - COMPLETE ADDRESS

2. PROJECT NUMBER:

3. PROJECT LOCATION (NUMBER, STREET, CITY, STATE, ZIP)

TELEPHONE:

4. PROJECT COMMITMENT DATE:

5. SUBCONTRACTOR ENTERPRISE (CHECK ONE)

❑Individual   ❑Partnership   ❑Corporation   ❑Joint Venture

6. THE UNDERSIGNED SUBCONTRACTOR IS PREPARED TO PERFORM THE WORK/SERVICE HEREIN DESCRIBED IN CONNECTION WITH THE PROJECT

This work/service will not be subcontracted to any non-minority firm:

WORK OR SERVICE	Commitment Date	Completion Date

7. SUBCONTRACTORS SUPERVISION STAFF TO INCLUDE FOREMAN (NAME, ADDRESS, TITLE)

8. BONDS - AMOUNT AND TYPE REQUIRED BY PRIME CONTRACTOR

9. BONDING COMPANY - NAME AND ADDRESS

IF YES - NAME AND ADDRESS

10. ARE BONDS GUARANTEED BY THIRD PARTY ❑YES ❑NO

11. PERCENTAGE OF WORK PERFORMED BY OTHER THAN OWN WORK

SOURCE (Include Name of Company and Address): _____ %
(Use back if necessary)

12. STATE THE TERMS OF ANY ORAL OR WRITTEN AGREEMENT(S) OR UNDERSTANDING(S) WITH NON-MINORITY PERSONS OR FIRMS RELATING TO ASSISTANCE, FINANCIAL OR OTHERWISE, TO BE PROVIDED BY SAID PERSONS OR FIRMS.

THE UNDERSIGNED SUBCONTRACTORS WILL ENTER INTO A WRITTEN CONTRACT WITH: _____ FOR THE WORK/SERVICE INDICATED ABOVE UPON THE PRIME CONTRACTOR'S EXECUTION OF A CONTRACT WITH THE MARYLAND JUDICIARY. THE UNDERSIGNED SUBCONTRACTOR IS CERTIFIED BY _____ AS A MINORITY BUSINESS ENTERPRISE, AS OF (DATE) _____

*NOTE TO PRIME CONTRACTOR. A FAILURE TO ACHIEVE THE ESTABLISH MBE GOAL MAY JEOPARDIZE FUTURE PARTICIPATION ON MARYLAND JUDICIARY CONTRACTS.

CERTIFICATION NO. _____

SIGNATURE SUBCONTRACTOR   TELEPHONE NO.

PRINT/TYPE NAME OF FIRM

NUMBER   STREET

CITY   STATE   ZIP   DATE

I AGREE TO THE TERMS AND CONDITIONS STATED ABOVE

SIGNATURE PRIME CONTRACTOR   TELEPHONE NO.

PRINT/TYPE NAME OF FIRM

NUMBER   STREET

CITY   STATE   ZIP   DATE

FORM MJ-EEO-004   03/2010

ADMINISTRATION COPY
NOTE: The required MBE forms must be submitted with your technical proposals/bid.