

# Communications Services Supplier Registration Form 2021

Email completed reference package to [commtenders@gov.sk.ca](mailto:commtenders@gov.sk.ca).

Please be sure to attach completed reference check forms and any additional pages as needed.

**Company Name:**

**Primary Contact Name:**

Address:

City:

Province:

Postal Code:

Phone:

Email Address

Website:

Date your company was established:

Branch office(s) location(s):

**Please provide the names and specific responsibilities of all owners/partners.**

Names of Owners/Partners	Responsibilities

**Please disclose any relationships between partners and client list.**

Partner	Client	Relationship

**Employees (owners/partners/contractors are not to be included):**

Number of full-time staff:

Number of part-time staff:

Please identify any partners employed by the Government of Saskatchewan in the past two years and where they were employed:

Partners Employed by Government of Saskatchewan	Ministry/Branch

Is your company limited to a particular geographical area for provision of services? If yes, please state location.

Yes , Location:

No

**Appointed individual who will have authorized access to the Oracle tendering system and online responsibilities:**

Name:

Phone number:

Email:

**Please identify the sub-classifications that you are capable of providing as in-house services. You will not be registered in any communications service category that you sub-contract.**

Primary Research & Analysis\*

- 2.1 Qualitative – In-person
- 2.2 Qualitative - Online
- 2.3 Quantitative – In-person
- 2.4 Quantitative – Online

\*This business class refers to creating and executing various forms of quantitative and qualitative surveys (online & in person), providing detailed analysis, organizing and facilitating focus groups.

Digital Marketing & Communications

- 3.1 Strategy, Information Architecture, Analytics Consulting, and UX
- 3.2 Web Design & Development
- 3.3 Mobile/Social Service Development

## Multimedia Production

- 4.1 Video Production
- 4.2 Post Production
- 4.3 Sound Production
- 4.4 Animation
- 4.5 Media Duplication Photography

## Photography

- 5.1 Photography

## Design & Desktop Publishing

- 6.1 Graphic Design
- 6.2 Desktop Publishing

## Writing

- 7.1 Writing

## Event Coordination

- 8.1 Event Planning and Experiential Marketing

## Marketing

- 9.1 Marketing Strategy
- 9.2 Social Media/Online Community Management

## Communications Management

- 10.1 Communications Strategy
- 10.2 Media Training

## Media Mentoring

- 11.1 Print & Broadcast Media Monitoring

### **Client References:**

In order to be registered in the business classification(s) checked above, please provide three client references you have worked with in the past two years. A reference may speak to multiple classifications. Do not include Government of Saskatchewan clients. Please attach the completed reference forms along with the completed registration form.

**Authorization of data:**

I/We wish to register my/our company as a potential supplier of goods and/or services to the Government of Saskatchewan.

I/We certify that the information contained in this registration form is correct and current.

I/We further certify that my/our company shall comply with the provisions of the Purchasing Act of Saskatchewan, and its attendant Purchasing Agency Operating Regulations.

I/We certify that my/our company will comply with the policies required by Communications Services.

I/We certify that neither the applicant nor any persons (or concerns) have any connection with the applicant as a principal or officer, so far as known, and is not deterred or otherwise declared ineligible by any public agency from bidding or furnishing materials, supplies or services to a public sector agency thereof.

I confirm that the information provided in this registration is accurate to the best of my knowledge.

I confirm that the above form is complete, including references

I confirm that all references have completed the below reference check form and all references check forms are attached.

**Submitted/Prepared by:**

**Name of Authorized Principal:**

**Date:**