



THIRD-PARTY VENDOR APPROVAL FORM

A completed approval form is required prior to vendor serving in any capacity on the JSU campus.

Please email the completed packet to aux@jsums.edu.

PLEASE PRINT OR TYPE LEGIBLY REQUESTING PARTY INFORMATION

DATE REQUESTED:		
PRINTED NAME:		
SIGNATURE:		
DEPARTMENT:		
EMAIL:	PHONE:	FAX:

EVENT INFORMATION

EVENT DATE:	EVENT LOCATION:
EVENT NAME:	

SUPPORTING DOCUMENTS REQUIRED

- General Liability Insurance
- Food Establishment Inspection Report | State Health Department Permit
- W-9
- Menu (Submit with Vendor Form)
- ServSafe Certification

THIRD-PARTY LIABILITY STATEMENT

To the extent permitted by the State of Mississippi law, Jackson State University and SodexoMagic are NOT liable for possible ailments/ allergic reactions for the consumption of food from third parties.

NAME OF BUSINESS:			
BUSINESS ADDRESS:			
CITY:	STATE:	ZIP:	
EMAIL:	PHONE:	FAX:	
TYPE OF FOOD TRUCK: (circle one)	TRUCK	TRAILER	OTHER _____

VENDOR PARTICIPATION FEE (VPF)

The Vendor Participation Fee (VPF) is \$200. This fee may be paid by check, money order or credit card. Payment must be received at least 5 business days prior to event. Check or Money Orders should be made payable to : Jackson State University

APPROVALS

DEPARTMENT:	PRINTED NAME:	SIGNATURE:	YES	NO	DATE
Auxiliary Enterprises	Kamesha Hill				
SodexoMagic-JSU Dining	SodexoMagic				
Follett- JSU Campus Store	Akilah Donald				

By signing above, you agree and approve of this vendor providing their service or product at the above mentioned JSU event.