



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 [Public Act 100-0140](#), 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](mailto:CEI.BEP.Compliance@illinois.gov) with the subject line, "Fiscal Year ## Higher Ed Supplier Diversity Report".

**Institution Name:** \_\_\_\_\_

**Institution Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

Please list the point of contact for the supplier diversity program. If there is no supplier diversity program, please list the information for the institution's procurement program.

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Please list the local and state certifications that the institution accepts or recognizes for minority-owned, women-owned, or veteran-owned business status:

- |          |           |
|----------|-----------|
| 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 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 Spend with M/W/VBEs  
(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  
(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 2:**

NIGP / NAICS / Description: \_\_\_\_\_

Goal Spend with M/W/VBE Vendors  
(total dollars): \_\_\_\_\_

Goal Percentage Spend with M/W/VBE Vendors  
(% of total): \_\_\_\_\_

Contact us at

Commission On Equity and Inclusion: 312 814-1054 | Business Enterprise Program: 312 814-4190



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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.**