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# APPENDIX A -INTENT TO PARTICIPATE

**WSIPC RFP 24-01 Student Safety Solutions**

**RFP Due Date: August 19, 2024 – 3:00 PM (Pacific Time)**

|  |  |
| --- | --- |
| To: | WSIPC |
|  | rfpadministration@wsipc.org |

|  |  |  |
| --- | --- | --- |
| From: | Contact Name |       |
|  | Contact Title |       |
|  | Company Name |       |
|  | Company Address |       |
|  | Phone |       |
|  | Email |       |

Please indicate that you intend to respond to the RFP by selecting YES below. By selecting YES, the undersigned agrees to abide by the terms set forth in the RFP.

|  |  |  |  |
| --- | --- | --- | --- |
| **We intend to submit our Proposal Form by 3:00 PM (Pacific Time) on 8/19/24.** | **YES** |[ ]   |  |

|  |
| --- |
| **[VENDOR NAME]** |
| By: |  |
|  | *(Signature)* |
| Name: | [PRINTED] |
| Title: |       |
| Date: |       |
| Address: | [CITY, STATE, ZIP] |