

**DESIGNATION OF AFFIRMATIVE ACTION REPRESENTATIVES  
BY CONTRACTORS/SUBCONTRACTORS**

In accordance with Equal Employment Opportunity (EEO) and Minority/Women Business Enterprise (M/WBE) Utilization participation requirements of the locally sponsored contract identified below, the following information shall be furnished by the contractor and all subcontractors prior to approval to work.

1. Contract No. \_\_\_\_\_
2. County(ies) \_\_\_\_\_
3. PIN \_\_\_\_\_
4. Project Sponsor \_\_\_\_\_
5. Contractor ☐ or Subcontractor ☐:  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
6. Equal Employment Opportunity Officer:  
Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Telephone \_\_\_\_\_
7. Contract Site Equal Employment Opportunity Representative:  
Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Telephone \_\_\_\_\_
8. Minority/Womens Business Enterprise (M/WBE) Officer:  
Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Telephone \_\_\_\_\_
9. Designation Submission: ☐ Initial ☐ Revised (Date: \_\_\_\_\_)