**Supplier Registration Form**

**Prior to onboarding any supplier, registering them on our database, and issuing a contract or order, this form must be completed.**

|  |  |
| --- | --- |
| **Date:** |  |

**Section I.** This section is to be completed by the Supplier.

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| --- | --- | --- |
| **Information Required** | | **Details** |
|  | Full company name (as it would appear on an invoice) |  |
|  | Any other names they may use as a legal entity |  |
|  | Full physical address: |  |
|  | * Street |  |
|  | * House Number |  |
|  | * ZIP/Postal Code (where applicable) |  |
|  | * Country |  |
|  | * Region (where applicable) |  |
|  | Company telephone number |  |
|  | Company email address |  |
|  | Company website |  |
|  | Contact person: |  |
|  | * Full name |  |
|  | * Function/title |  |
|  | * Telephone |  |
|  | * Email address |  |
|  | Bank account details: |  |
|  | * Account Name |  |
|  | * Account Number |  |
|  | * Sort Code |  |
|  | * Bank Name |  |
|  | * IBAN |  |
|  | * SWIFT/BIC |  |
|  | * *Attach proof of bank account details* |  |
|  | Payment Terms | Standard payment terms are 30 days after the invoice date, unless otherwise contractually agreed. |
|  | Currency |  |
|  | Tax ID – applicable for supplies based in the US only |  |
|  | INCOTERMS (where applicable) |  |

**FOR INTERNAL USE ONLY**

**Section 2.** This section must be completed by the Plan International Purchaser who is handling the procurement transaction with the supplier named in Section I.

As a minimum all suppliers must be evaluated against the following criteria:

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | | **Yes or No** | **Comments** |
|  | Is the supplier operating out of premises? |  |  |
|  | Has the address, contact name and telephone number been verified? |  |  |
|  | Is the Supplier registered, legal and legitimate in the country? |  |  |
|  | Does the Supplier produce receipts with a stamp/headed paper identifying the company? |  |  |
|  | Does the Supplier have a good reputation/standing (no police/government/other agency issues)? |  |  |
|  | Has the Supplier screening been completed? |  | Case ID: |
|  | Has the Supplier agreed and signed the Non-Staff Code of Conduct? |  |  |
|  | As per the Non-Staff Code of Conduct (7) above, if the Supplier has direct involvement with children and/or young people please confirm they have read and signed the “Global Safeguarding Policy”. |  |  |
|  | Proof of bank account details have been received |  |  |
|  | For any US based supplier, confirm that the supplier has completed 1099/W9 form: <https://www.irs.gov/pub/irs-pdf/fw9.pdf> |  |  |
| **If there are any risks identified under Criteria 1-8 above, please add the details below:** | | | |
|  | | | |

|  |  |
| --- | --- |
| Purchasers Name: |  |
| Job Title: |  |
| Signature: |  |
| Date: |  |