CONSULTANT REGISTRATION FORM

If you plan on submitting a proposal for this project, please complete this registration form and e-mail it to Diana Peterson, Sr. Contract Administrator at <u>purchasing@seattlehousing.org</u> so that you can be contacted directly if necessary.

Seattle Housing Authority

RFP Solicitation No. 5205

JobLink Mental Health Consulting Services

| Name of Firm: | |
|-------------------|--|
| Business Address: | |
| | |
| | |
| Contract Name: | |
| Title: | |
| Telephone No.: | |
| E-Mail Address: | |