

Business Self-Certification Form

For assistance, please email:
Supplier_Diversity@navient.com

1. **Company name and DBA as it appears on W-9. (REQUIRED-Attach copy of W-9):**

2. **DUNS (Data Universal Numbering System) or UEI (Unique Entity ID), if applicable:** _____

3. **NAICS Code(s) to be utilized for business size indicated below and service/material provided (REQUIRED):**

To obtain NAICS classifications, log on to: <https://www.census.gov/naics>

4. **Business Size Representation- as defined by the SBA- (REQUIRED- Indicate one from the below):** Company represents, pursuant to government law or regulation that it is (definitions available in FAR Subpart 2.1- Definitions or 52.219-8 at https://www.acquisition.gov/far/part-52#FAR_52_219_8 and <http://www.sba.gov/content/small-business-size-standards>):

- Small Business (SB) **Please notify us immediately upon a change to size.*
 Large Business (LB)

5. **SBA Small Business Classification Representation (Indicate all that apply. Include Certification begin/end dates and the Certifying Organization):**

- Small Disadvantaged Business Enterprise (SDBE)- self certified
 Small Business Enterprise (SBE)
 Woman-Owned Small Business Enterprise (WOSBE)
 Certified by the SBA as a HUBZone Small Business (**HUBZoneSB**)- **Attach Valid SBA Certificate**
 Veteran-Owned Small Business Enterprise (VOSBE)
 Service-Disabled Veteran Owned Small Business Enterprise (SDVOBE) **Please also mark VOSBE*

6. **Diversity Classifications (Indicate all that apply. Include Certification begin/end dates and the Certifying Organization):**

- Minority Business Enterprise (MBE)*
***If Minority-Owned please identify the racial background of the business ownership for our MBE business records:** _____
 Women Business Enterprise (WBE)
 Local Business Enterprise (LBE)
 Indian Tribe (IN)
 Alaska Native Corporation (ANC)
 Lesbian, Gay, Bisexual and Transgender Business Enterprise (LGBTBE)

7. **State/Locality Certifications:** _____

8. **Notification:** Under U.S.C. 645(d), any person who misrepresents its firm's size status shall (1) be punished by a fine, imprisonment, or both; (2) be subject to administrative remedies; and (3) be ineligible for participation in programs conducted under the authority of the Small Business Act.

9. **Provide a brief description of the service(s) and/or product(s) provided by the company.**

10. **Company's Execution (REQUIRED):** By signing the document, the company acknowledges all the details provided on the form and within the supporting documents are accurate, true, and that the company has read and understands the information.

Company Address: _____

City, State, Zip: _____

Phone Number: () _____ **Company website/LinkedIn URL** _____

Name of Company Officer or Designated Representative: _____

Signature: _____ **Title:** _____

Email Address: _____ **Date:** _____