

## SUPPLIER REGISTRATION FORM TEMPLATE

**The information on the Supplier Registration Form is for internal use of World Vision Afghanistan**  
**Disclaimer: World Vision shall maintain in confidence all information provided by the Supplier. This information is for internal use ONLY & will not be shared with a Third Party.**  
**The World Vision Partnership has a "zero tolerance policy" on corruption and fraud**

### GENERAL INFORMATION

<b>Supplier's Full Name</b>			
<b>Acronyms the Supplier is known by (e.g. PriceWaterHouse Coopers is also known by the Acronym ("PwC"))</b>			
<b>Country(s) in which registered</b>			
<b>Address of Head Office</b>			
<b>In which countries do you have offices?</b>			
<b>Do you procure items from countries other than those in which you have offices? If so, please list these countries</b>			
<b>Date Established</b>		<b>Number of employees</b>	
<b>Business Licence Number</b>	<b>Date of Issue</b> <b>Date of Expiry</b>		
<b>Tax Identification Number</b>			
<b>Which Global Markets supplied to? (Geographic coverage)</b>			
<b>Annual Turnover for the last Three (3) Years (in USD)</b>		<b>Previous Year's Net Profit after taxes (in USD)</b>	
<b>Quality System Certification</b>			
<b>ISO (please, list)</b>			
<b>Other (please, list)</b>			

## CONTACT INFORMATION

### General

**Main Office Telephone number**  
(including the country dial code)

**Company email address**

**Company website (if applicable)**  
(URL)

### CEO

**CEO Full Name**

**Date Of Birth**

**E-mail**

**Telephone No**  
(full with the country dial code)

**Mobile No**  
(full with the country dial code)

### Primary Contact (key staff member)

**Contact Name**

**Date Of Birth**

**E-mail**

**Position**

**Telephone No**  
(full with the country dial code)

**Mobile No**  
(full with the country dial code)

### Secondary Contact (key staff member)

**Contact Name**

**Position**

**E-mail**

**Telephone No**  
(full with the country dial code)

**Mobile No**  
(full with the country dial code)

**Bank Name:**

**Account Currency:**

**Bank Branch Name:**

**Account Name:**

**Account Number:**

**Swift Code:**

**IBAN Number:**

**Supplier's Owners**

Please provide identification documents for each of the Owners as well

Full names of Supplier's Owners (e.g. board members, directors etc.) (please provide first name, middle name (s) and surname) :	Shares % in Organisation
Full name of Owner 1	<i>Shares % in Organisation</i>
Full name of Owner 2	<i>Shares % in Organisation</i>
Full name of Owner 3	<i>Shares % in Organisation</i>
Full name of Owner 4	<i>Shares % in Organisation</i>
Full name of Owner 5	<i>Shares % in Organisation</i>

PRODUCTS/SERVICES INFORMATION	
1. Product/Service Name	
2. Description	
3. Price	
4. Quantity	
5. Unit of Measure	
6. Supplier/Manufacturer	
7. Date of Purchase	
8. Location of Purchase	
9. Other Information	

<b>Type of Business</b> (Tick the options or add relevant sector)	<b>Manufacturer</b>		<b>Wholesaler</b>	
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Locations of Warehouses (EXW)			
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COMPLIANCE CERTIFICATIONS	
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COMPLIANCE WITH WVI POLICIES	Supplier confirms that it will comply with WV AFGO Policies (Y/N)
World Vision Supplier Code of Conduct	(Y/N)
Conflict of Interest Disclosure	(Y/N)
Child and Adult Safeguarding behaviour protocol	(Y/N)
Are you or any of the employees and staff within your organisation beneficiaries of WV Services? If the answers is YES provide details	(Y/N)
Supplier hereby certifies that it has not provided and will not provide any support or resources to any individual or organisation that it knows or has reason to believe is an individual or organisation that advocates, plans sponsors, engages in or has engaged in an act of terrorism	(Y/N)
Supplier hereby confirms that within the last three years, no administrative, civil or criminal litigation has been filed against the Supplier. If the answer is YES please provide details	(Y/N)
Have you ever been involved in, supported, or encouraged terrorist activities in any country? Have you, ever been a member of, or given support to an organisation that has been concerned in terrorism If the answers is YES provide details	(Y/N)
Do you provide WV with the consent to conduct background checks on the company and its board of directors including the watchdog screening (where applicable)? If the answers is NO provide details	(Y/N)
<b>Documents to be annexed to this form</b>	
Registration Form (if registered)	Y/N/ Not applicable
ID documents for each of the Supplier's owners	Y / N

FORM COMPLETED BY (full name and position)	
SIGNED	
DATE	
OFFICE STAMP/SEAL	

\* If other, please specify the product in the Products/Services Description and Main Product/Services columns  
 \*\* Add additional product information/catalogue if available