

THE MISSISSIPPI DEPARTMENT OF EDUCATION OFFICE OF PROCUREMENT

Program Office:

| Name of Solicitation: | | |
|--|--------------------------------|--|
| Due Date of Responses: | | |
| Number of Responses Received: | | |
| Number of Responses Meeting Requirements: | | |
| Number of Responses Rejected: | | |
| IFB/Applications/Proposals/Qualifications Not Evaluated | | |
| # | Offeror/School District/Entity | Not Evaluated Reason Provide solicitation page # and requirement(s) not met. |
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| ** Please obtain signatures and an approval PRIOR to the Evaluation. | | |
| Bureau Director | | Date |
| Procurement Director | | Date |
| If applicable: | | |
| The Office of the Attorney General D | | Date |