



Partner Profile Form

Is this:

- New Partner Application
- Update to an Exiting Partner

Submitter Information

First Name: _____

Last Name: _____

Job Title: _____

Email: _____

Phone: _____

Fax: _____

Corporate Information

Company Name: _____

Address 1: _____

Address 2: _____

City: _____

State/Province: _____

Postal Code: _____

Country: _____

Website Address: _____

Email: _____

Phone: _____

Fax: _____

Please list any other names that your company uses when doing business

Additional Names: _____

of Sales People: _____

of Engineers: _____

of Employees: _____

Year Established: _____

Type of Business

- Commercial

- Federal
- What if any Federal contracts do you currently hold?**

What if any State and Local contracts do you currently hold?

Please provide a description of your company in 1000 words or less. Please highlight your IT Security specific solutions and capabilities.

Describe your Business Ownership and Management Structure.

**Why do you want to become a member of the VigilantMinds Security Partner Program?
(Complete only if you are applying to become a VigilantMinds Partner!)**

Main Contact Information:

First Name: _____

Last Name: _____

Job Title: _____

Email: _____

Phone: _____

Fax: _____

VigilantMinds Marketing Funds Contact:

First Name: _____

Last Name: _____

Job Title: _____

Email: _____

Phone: _____

Fax: _____

Geographical Service Areas:

Vertical Markets

Financials:

Company Revenues:

2002 _____

2003 _____

Security Revenues:

2002 _____

2003 _____