



COMMONWEALTH OF VIRGINIA
Department of Small Business and Supplier Diversity

SWaM Certification Program
Appeal Request

Company Name:

Contact Person for Appeal:

Email Address for Appeal:

Contact Phone Number:

SWaM Certification / Record Tracking number:

Type of Certification Originally Sought:

Small Women Owned Minority Owned Micro Veteran

Date of Denial Notice:

Grounds for the Appeal

A change that was seemingly made based on, and/or as a result of, being denied certification is not an acceptable reason for an appeal, and in such a case, the request for a hearing may be denied. New information not previously known at the time of denial, but that is pertinent to the denial, may support your request for a hearing.

Please state the reasons upon which your firm is requesting a hearing and attach *all* relevant supporting documentation.

Based upon the documentation submitted, the Department may further request that your written appeal be supplemented with your appearance at an in-person hearing, or optionally in the case of an out-of-state firm, a phone conference hearing:

List of Attached Supporting Documents That Were NOT Previously Submitted:

- 1.
- 2.
- 3.
- 4.

Business Owner's Signature: _____

Business Owner's Printed Name: _____ **Date:** _____

Business Owner's Title: _____

Please send the completed form via email to:

Email: Send to **appeals@sbsd.virginia.gov** with a subject line of "SWaM Informal Hearing"