Contract/Agreement Routing Form

Request Help



Please click here for form Information & help: Contract Review and Approval Process Summary (opens in a new window)

Requesting i	Departn	<u>ient</u>									
Department Name			Room/Buildin		uilding						
Contact Person				Telephoi	ne						
E-Mail Address				Fax							
Contractor Ir	nformat	ion									
Contractor Name		1		Telep	elephone			Source of Funding:			
Contact Person											
Address		Fax									
E-Mail Addre	ess										
Contract Des	scriptio	1									
Purpose of C					E	Benefit to I	Jnivers	sity: A	cademic		Research
								(Operational		Other
Contract Am	ount:	7					Start Date:			End Date:	
Requisition N	Number	Annual Cost	Total Cost					mm/dd/yyy red for Expe			mm/dd/yyyy
							(. 10 qu				
Is this a "Sol	le Sourc	e" contract?	-	tract <\$10k	<u>()</u>	No `	es If	yes, justific	ation must	be pro	vided
Is your Attestation Re Personnel Used in Contract Performance attached? (Required for Personal Service, Professional Service, Consultant Service Contracts, and all contracts for acquisition of hardware, software and related services)			No '	Yes							
Will any University data be released as a result of this contract?			No (If yes, appro	Yes priate ITS a	appro	val require	ed in "C	ontract Ro	uting and A	\pprova	als" section below.)
Will any student information be released as result of the contract?			No '	Yes							
What other departments are affected by this contract?											
Specify the individual in your department (Contract Monitor) responsible for ensuring receipt of goods/services contracted for under this agreement:											
Specify an Alternate Contract Monitor:											
Specify the frequency of monitoring (quarterly, semi-annually, annually, etc.):											
Please	proc	eed to <u>this link</u> to comple	ete and s	ubmit	the	Contr	act N	Monito	ring Pla	an a	s proposed.

I certify that I have read the attached contract/agreement and that the requesting department will comply with all its requirements and have notified any other departments affected by this contract/agreement. I recognize that while the Procurement and Contract Services, Business Services, ITS, or the Office of Legal Counsel may analyze the contract from a legal or policy perspective, it is the requesting department's responsibility to (a) ensure the specifications are sufficient and/or practical for department need; (b) funds are available; (c) monitor compliance, expiration, and payment; and (d) ensure no violation of University policies and procedures in connection with this contract, including the policies on UM1692: Conflict of Interest and UM1691: Campus Data Security.

Contract/Agreement Routing Form

Requesting Department:		
	Department Contact/Contract Monitor	Date
Approved By:		
	Financial Manager / Director / Department Chair	Date
Approved By:		
	Dean/Assistant Vice President (If \$50,000 or more)	Date
Approved By:		
	Vice President / Provost (If \$100,000 or more)	Date

Type of Contract (Select One)	Routing Sequence	Approvals	Date
A. Standard Contracts and Vendor-Generated Contracts Clinical Affiliation	Procurement and Contract Services (279, 2365)		
IT Products (Computer Hardware, Software, IT Services, Cloud	(678-2265)		
Environments, etc.) Services (Banking, Dining, Equipment Maintenance, etc.)	2. Legal Counsel (if applicable)		
Continuing Education	3. Business Services (if applicable)		
Dual Service	4. ITS (Hardware or Software)		
Facilities Use			
Personal, Professional, and Consultant Services			
B. Specific Non-Standard Contracts Music Performance License	1. Business Services (678-2307)		
Partnership	2. Legal Counsel (if applicable)		
Performance			
Real Property Lease			
C. All Other Non-Standard Contracts	1. Legal Counsel (678-2155)		
	2. Business Services (if applicable)		
	3. ITS (Hardware or Software)		

For Office Use Only: Contract N	umber	Purchase Order Number

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