

**CONTACT INFORMATION**

Requesting Department	Requesting Person/Phone	Administrative Contact/Phone
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**CONTRACT DETAILS**

Vendor Name (Business or Individual)	Contract Start/End Dates	Total Contract Dollar Amount
Description of Services/Goods Procured		Funding Source Account No. / Project ID No.
Contract is: <input type="checkbox"/> New <input type="checkbox"/> Renewal (original attached) <input type="checkbox"/> Amendment (original attached)		Grant Funds Involved? <input type="checkbox"/> Y <input type="checkbox"/> N
Contract Payments To/From: <input type="checkbox"/> GSU <input type="checkbox"/> Foundation <input type="checkbox"/> Research Foundation <input type="checkbox"/> Athletic Association <input type="checkbox"/> Alumni Association		
Will the Services/Goods Procured under this Contract:		
<input type="checkbox"/> Y <input type="checkbox"/> N Involve Regular Interaction by Vendor with GSU Students, Employees, Funds, Sensitive Data or Facilities?		
<input type="checkbox"/> Y <input type="checkbox"/> N Use Student Information of Any Kind?		
<input type="checkbox"/> Y <input type="checkbox"/> N Use Health Information of Any Kind?		
<input type="checkbox"/> Y <input type="checkbox"/> N Use GSU IT Networks?		

**AUTHORIZED SIGNATORY FOR CONTRACT**

The person listed below is the Authorized Signatory who will sign this Contract once approved by Legal Affairs. Only Authorized Signatories may sign GSU contracts. A complete list of Authorized Signatories is available: <http://universityattorney.gsu.edu/legal-services/contracts>. All GSU contracts ≥ \$25,000 must be signed by the President or SVP/Finance and Administration.

Name of Authorized Signatory for this Contract	Title
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**DEPARTMENTAL CONTRACT SUPPORT**

Requesting Department Head confirms that contracting with this vendor complies with the GSU Policy on Individual Conflict of Interest (available in pertinent part at <https://universityattorney.gsu.edu>) and approves the purchase of services/goods upon the described business terms. Department has sufficient funds to cover the financial obligations of the contract.

Name of Requesting Department Head	Signature	Date
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**PURCHASING APPROVAL (if University funds used)**

Purchasing has reviewed the attached contract and it satisfies applicable procurement requirements.  
 E-Verify:  Satisfied  Pending

Name of Purchasing Officer	Signature	Date
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**FOUNDATION APPROVAL (if Foundation funds used)**

The Foundation has reviewed the attached contract and it satisfies applicable Foundation requirements. The Requesting Department has sufficient Foundation account funds to cover the financial obligations of the contract.

Name of Foundation Officer	Signature	Date
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**LEGAL AFFAIRS APPROVAL PLEASE ALLOW 2 WEEKS IN LEGAL AFFAIRS FOR REVIEW**

Legal Affairs has reviewed the attached contract and approved it for signature by an Authorized Signatory as follows:  
 Without Changes  With the Included Changes (Both Parties must Initial Changes for Contract to be Binding)

Name of Legal Affairs Attorney	Signature	Date
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