



This Form is for B-CU Internal
Purposes and Should Not be
Provided to Vendor

CONTRACT APPROVAL COVERSHEET

This form standardizes the contract process and is to be used as the cover sheet to ensure the complete review by appropriate departments.

Requesting Department: _____

Date Initiated: _____

Name: _____

Phone: _____

E-Mail: _____

Term of Contract: _____

Financial Obligation: _____

Contact Type: _____

Contract Purpose _____

Has the University contracted with this vendor in the past or is a renewal or extension of a previously approved?
Contract? Yes ___ No ___

If YES, attach a copy of the relevant.

Dean, VP or Department Chair and Fiscal Officer Approval:

I certify that I have read and understand the terms of this draft agreement and have appropriate authority to submit this draft agreement on behalf of my department. I further certify that the draft agreement is complete and includes all exhibits, attachments and pages.

Dean, VP or Department Chair:

Name: _____ Signed: _____ Title: _____

Contracting Department use

Approved

Date

Administrative Review By:

☐ Institutional Effectiveness and Compliance

☐ Business Affairs

☐ General Counsel

☐ President's Office

Recommendation:
