Fairleigh Dickinson University

Contract Routing Form

 **Deadline for contract approval**

 **\*Minimum 21 days from receipt of all information & required approvals**

**Requesting Department Information**

Department Name: Department Contact:

Employee Managing Activity: Contact email address:

**Confirm:**

Department has confirmed that vendor/contractor is not an FDU employee and does not employ an FDU employee. Department has confirmed that no FDU employee who has any financial interest in the vendor/contractor is in a position to influence the award of this work or the performance of the contract: No □ Yes □

**Vendor/Contractor Information**

Businesses’ Name: New Vendor: □ Existing Vendor □

Vendor Contact: Vendor email address:

**Contract Information**

Purpose of Contract:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Note: The Purpose should be sufficiently detailed to enable the contract reviewers to confirm that the terms and conditions meet the Department’s goals for the transaction. For any contracted services where University data will be shared with vendor/contractor and/or hosted or stored externally on a Computer Network or in the Cloud, the detail must list all specific University data that will be shared and/or stored, e.g., PII, PHI or PCI.**

Contract Amount $ over \_\_\_\_\_\_\_\_\_ months Sole Source (No-Bid) Contract: No □ Yes □ (attach justification)

Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Renewal: No □ Yes □ Automatic: No □ Yes □

**Other reviews:** In accordance with the University’s *Purchasing Policies and Procedures,* the *Contract Approval and Signatory Authority Policy* and *Fairleigh Dickinson University Contract Procedures,* certain University transactions require review and approval from other departments. Please have the appropriate person sign below indicating their review and/or approval.

□ For Affiliation Agreements containing financial component (requires approval of SVP Finance and Admin and Provost)

□ For Computer Hardware, Software, Data Security and Related (requires approval of VP, OIRT)

□ For Employment Services, including temp agencies (requires approval of VP, Human Resources)

□ For Construction, Machinery, Hazardous Materials, Safety (requires approval of VP, Facilities & Auxiliary Services)

* Marketing (requires Approval of VP, Enrollment, Planning and Effectiveness, and Assoc. VP, University Communications) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Alcohol Use (requires submission of the approved Alcohol Use Form) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Travel Abroad (requires submission of the approved Travel Abroad Form) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I acknowledge that I have read and understand the attached contract and that upon final execution I will comply with all its requirements and am responsible for: (a) monitoring compliance, expiration, and payment; and (b) ensuring that none of the University's policies are violated in connection with this contract, including the University's Code of Conduct and Conflict of Interest and Nepotism policies.

Responsible Officer / authorized delegate (sign) Date

# General Contracts - Submit to contractreview@fdu.edu Affiliation Contracts - Submit to affiliation@fdu.edu

Employment Contracts - Submit to employmentcontracts@fdu.edu