

Contract Routing Form

Requesting Dept.: _____

Point of Contact (POC): _____

POC Phone: _____

POC email: _____

Deadline for contract approval : _____

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

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

Confirmed:

Vendor/Contractor Information:

Businesses' Name: _____

 New Vendor

 Existing Vendor

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 Start Date: _____

Contract End Date: _____

Contract Amount \$ _____ over _____ Months

 Does this involve money being **paid to** FDU from a foreign source?

 Yes

 No

Note: If yes, a Foreign Source Contract Reporting Form must be submitted

Other reviews:

Certain University transactions require review and approval from other departments. Check all that apply (any checked will be routed accordingly):

 Affiliation Agreements containing a financial component

 Computer Hardware, Software, Data Security

 Employment Services, including temp agencies

 Construction, Machinery, Hazmats, Safety

 Marketing

Additional Forms if Required by Nature of the Contract:

 Alcohol Use (requires submission of the approved Alcohol Use Form)

 Travel Abroad (requires submission of the approved Travel Abroad Form)

 Foreign Source Contract (Requires submission of the Foreign Source Contract Reporting 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 no University 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