

University of Houston Victoria

CONTRACT COVER SHEET

Revised November 2007

Instructions: This contract coversheet is required for all non-standard vendor contracts and consulting agreements (regardless of dollar amount and source of funds) and all standard contract over \$3,000. If you have any questions, contact Business Services motals@uhv.edu or call x-826.

Originating Department Information

1. UHV Department _____ Date _____
2. Department Contact _____ Phone _____ Email _____
3. Cost Center (Fund, Dept, Prog, Proj, SpeedType) _____ Account _____
Amount _____ Signature Authority/Title _____
4. Cost Center (Fund, Dept, Prog, Proj, SpeedType) _____ Account _____
Amount _____ Signature Authority/Title _____
5. Department official authorized to execute this contract-Name/Title _____
6. Who will monitor this contract after executed-Name/Title _____

Contractor/Vendor Information

1. Contractor/Vendor _____ Contact Name _____
2. Address, City, State, Zip _____
3. Phone # _____ Fax # _____ Email _____
4. **Yes** **No** Has vendor been set up in PeopleSoft? PS ID# _____ If **No**, send [vendor form](#).

Contract Information (Use separate sheet or comment section if necessary)

1. Detailed Scope of Work:

1a. Purpose/Benefit Statement:

2. Contract Term - (Allow [time](#) to process) Starting Date _____ Ending Date _____
3. Contract Amount - Services \$ _____ Reimbursable \$ _____ Total Contract \$ _____
4. Payment Schedule: Standard 10 days upon completion of services or
 Other (describe) _____
(Payments in advance prohibited unless exception applies, see <http://www.uhv.edu/purchasing/AdvancedPayments.asp>)
5. **Yes** **No** Was the contractor an employee of UHS during the past 12 months?
6. **Yes** **No** Is the contractor known to be related to anyone in the department? *(Related party/conflict of interest)*
7. **Yes** **No** Has the vendor provided their own contract form? If **Yes**, two original copies of contract must be completed (but not signed) and included with this cover sheet. Legal review required.
8. **Yes** **No** Does this contract involve Consulting Services?
9. **Yes** **No** Does the contract provide for extensions or renewals? If **YES**, how many _____. Including extensions and renewals what is the estimated total value of the contract \$ _____.
10. **Yes** **No** Is this a revenue generating contract?

Additional Comments:

Business Services Use: Contract # Assigned: _____ **Date Received:** _____