## Tennessee State University CONTRACT ROUTING AND APPROVAL FORM

(All sections must be completed.)

REQUESTING DEPARTMENT											
Department Name						Email					
Contract Agent						T	el -				
	CONTRA		Check	box if	foreign e	ntity					
Contractor Name						Ema	ail		-		
Contact Person						Т	el				
CONTRACT DESCRIPTION/INFORMATION											
Type of Contract	☐ Professional	☐ Amendment or Renewal									
1 ype or contract	☐ Letter of Agreement (\$500.00 or less)					☐ License or Subscription					
	☐ Facility Use Agreement				□ MOU / MOA						
	☐ Subaward-Subrecipient Agreement				☐ Performance or Athletic Agreement						
	☐ Clinical Affiliation Agreement				□ Other:						
Purpose of Contract (Description)											
Term of Contract	Start Date					End Date					
Budget/Financial	Has the contract amount been approved by the Business and							tain approval			
Approval	Finance department as being within budge								from Business and		
	☐ Yes Finance before										
	□ No proceeding							ng.			
Contract Amount	\$ Account No.			Purcha Req. N							
Procurement	(1) Is the contract (2) If <b>yes</b> , a bid								If <b>no</b> , submit Non-		
Checklist					sen after RPF or			Competitive Contract			
	☐ Yes another competi					tive process? Re			equest to Procurement.		
	□ No □ Yes										
	□ No										
	Provide Procurement with:										
	□ IRS W-9 Form										
	Minority Ethnicity Form										
	□ Proof of RFP or Non-Competitive Contract Request submission (if over \$10,000)  *TO BE FILLED OUT BY THE OFFICE OF THE GENERAL COUNSEL*										
Legal Review	Has this contract been reviewed for legal sufficiency?										
	☐ Yes										
□ No											
CONTRACT CERTIFICATION & APPROVALC											
CONTRACT CERTIFICATION & APPROVALS											
I certify that I have read the attached contract, and that the requesting department will comply with all of its requirements. I recognize that while the Procurement Office and the Office of the General Counsel may review the contract from a legal or policy perspective, it											
is the requesting department's responsibility to ensure the specifications are sufficient and/or practical for departmental needs and to											
monitor the contract for compliance, payment, and expiration.											
I FURTHER CERTIFY THAT I HAVE OBTAINED ALL REQUIRED APPROVALS TO SUBMIT THIS CONTRACT FOR REVIEW,											
INCLUDING SECURING APPROPRIATE FUNDING FOR THE CONTRACT AMOUNT.											
	PRINT NAME SIGNATURE										
	FIXINI NAPIL				SIGNATURE						
Contract Agent									Date		
Department Head &											
Dean or Director									Date		
Academic Affairs Budget Officer									Date		
Associate/Assistant									D-4		
Vice President									Date		
Vice President									Date		