



CONTRACT COVER SHEET AND APPROVAL FORM
Office of Contracts Administration
311 E. Cullen · Houston, Texas 77062 · Phone (713) 743-5654

Contract No.: K- _____
 (To be entered by Contracts Administration)

General Information

UHS/UH Department: _____
 Contact Person: _____
 Campus Mail Code: _____
 Telephone: (_____) _____ Fax (_____) _____ Email _____
 Business Administrator: _____
 Campus Mail Code: _____
 Telephone: (_____) _____ Fax(_____) _____ Email _____

Summary of Contract Terms

Contract with: _____
 NAME OF CONTRACTOR

Peoplesoft ID and/or Tax ID _____ Contact Person: _____

Street Address: _____ City, State and Zip Code: _____

Description: _____
 GOODS AND/OR SERVICES TO BE PROCURED, PHYSICAL LOCATION, ETC.

Contract Term: Start ____/____/____ End ____/____/____

Total Amount of Contract: _____

Source of Funds: _____
 Cost Center: Acct _____ Fund _____ Dept ID _____ Prog _____ Proj _____ Amt _____

Revenue: Acct _____ Fund _____ Dept ID _____ Prog _____ Proj _____ Amt _____

Official Authorized to Sign: _____
 IDENTIFY WHO WILL SIGN CONTRACT ON BEHALF OF THE UNIVERSITY OF HOUSTON SYSTEM PURSUANT TO MAPP,
 SAM AND BOARD POLICIES

Certifications: *Complete before sending with contract to Office of Contracts Administration.*

REQUIREMENT

(All blanks must be initialed)

Responsibility	_____	Ensures primary responsibility for the contract, from inception to completion of the transaction (See MAPP 04.04.01A (III) (A)).
Original Contracts and Signatures	_____	Two (2) original contracts (not facsimiles) have been submitted and original signatures from the contracting parties will be obtained before the beginning date of the contract.
Complete Contract Package and Departmental Acceptance	_____	1) The contract and all documents if any that are incorporated by reference in the contract, including exhibits and appendices are attached; and 2) All such documents have been read and agreed to in their entirety by originating department and any faculty and staff members who have obligations under this contract.
Contracting Party	_____	The name of the contracting party is stated as the University of Houston System or its component Institutions (e.g., University of Houston, University of Houston - Victoria), and is not a department or program.
Competitive Bid	_____	The proper procurement method has been used which provides the best value to the University in making the contract award. (See MAPP 04.04.01A (IV)(A)).
Consulting and Professional Services Contracts	_____	Consulting and Professional Services Contracts are subject to specific notice and reporting requirements that require the originating unit to contact the Office of Contracts Administration for assistance (See MAPP 04.04.01A (IV)(C)).
Standard Form of Agreement	_____	If a standard form of agreement, I certify that no changes to the agreement have been made, including additional attachments or addenda. If changes have been made, I have attached and highlighted those portions of the agreement.

Certification of University Employee(s) With Responsibility for Ensuring Contract Terms and Conditions are Met

I have read this contract entirely. I am satisfied with its description of the goods and services to be provided to the University (including, for example, warranties, delivery terms, acceptance period, and maintenance terms). I am also satisfied with the description of the University's obligations (including, for example, scope of work, payment due dates, late charges, tax, charges, insurance, and confidentiality requirements) and all other provisions of this contract, except as noted in any attached memorandum. A memorandum [is] , [is not] ,(circle one) attached. **I acknowledge responsibility to ensure that all good faith efforts are employed in seeing that all terms, conditions and responsibilities of the contract are met.**

Name (Originating Unit/Official w/Delegated Authority) Signature Date

Title

Name (College/Division Business Administrator) Signature Date

Title