**Operations Sector Contract Signature Request Memo**

***\*\*PLEASE ALLOW NO LESS THAN 2 DAYS FOR VP/CFO TO RETURN THIS SIGNATURE REQUEST\*\****

**Today’s Date: Date Due back to Originator:**

**Originator (name and initials): New Contract**

 **Contract Modification**

 **Contract Renewal**

**Subject:** (*Current year, name of vendor, brief description of services, duration of contract, and total $ contract amount)*

**Summary of Request**: *(Please include the total duration/ start and end date of the contract, vendor name, a concise description of the scope of services, the primary department responsible for the management of this contract, and the location/department this contract will support)*

**Business Justification:** *(What is the business purpose? Why is this necessary? Describe the historical business relationship with the Vendor(s) and the University if applicable. Elaborate on the risks or concerns of not having this contract in place.)*

**Competitive Bid:** *(Was this contract competitively bid out? If not, what circumstances prevented a competitive bid? What steps are being made to competitively bid this work out prior to the contract end date? What are the key drivers for selection? What is the return on investment, payback period, savings, or cost avoidance from current business practice as a result of this contract?)*

**Bid Analysis:** *(Provide an overview of Bid Analysis results, if applicable.)*

**Sustainability:** *(Describe the vendor's sustainability policy/practices. What are the sustainability-related areas that impact this contract and how will they be implemented throughout the duration of this contract?)*

**Diversity Equity & Inclusion:** *(Is the vendor a certified Diverse vendor per New York State requirements? If not, describe the vendor's DEI policy/practices or initiatives that support DEI.)*

**Award Recommendation:** *(Narrative as to why the decision was made including and rationale for the recommendation.)*

*The attached document has been reviewed and approved by those named below to be forwarded on to Sharon Hewitt Watkins for signature:*

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Executive Director/Director Date

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Associate Vice President Date

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Legal Counsel Date

* Legal review not required – Standard Contract \_\_\_\_

PM Initials Required