

CONTRACT APPROVAL COVER SHEET
DELIVER TO: OFFICE OF THE GENERAL COUNSEL, 378 COLUMBUS PLACE

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| Submitted by: | |
| Date Submitted: | |
| Department: | |
| Phone # & Email: | |
| Additional Contacts: | |

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| 1. Full, legal name of the vendor/service provider/other party: | | |
| 2. If this is an agreement for an event, state the date of the event: | | |
| 3. Is the document you are submitting an NU template agreement? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3 a. Have changes been made to the NU template agreement? If Yes , Indicate section(s) or paragraph(s) changed: _____ _____ | Yes <input type="checkbox"/> (also answer "3 a") | No <input type="checkbox"/> (also answer "3 b") |
| 3 b. If no to question 3 , has the University contracted with this party in the past? <u>Please attach a copy of the relevant agreement if the University has contracted with this party in the past.</u> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Does University policy require a certificate of insurance (COI) from the vendor? If yes , attach a certificate of insurance. See http://www.northeastern.edu/risk_services/index.php for specific insurance requirements. <u>If University policy requires a COI, we cannot review the document until we have received the COI.</u> Questions regarding insurance should be directed to the Risk Services Department. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Does the draft agreement require the University to pay more than \$1,000,000? If yes , prior approval from the Board of Trustees may be required before the University can sign. Contact the Office of the General Counsel at extension 2157 for more details. | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

YOUR CERTIFICATION:
I CERTIFY THAT I HAVE READ AND UNDERSTAND THE TERMS OF THIS DRAFT AGREEMENT AND HAVE APPROPRIATE AUTHORITY TO SUBMIT THIS DRAFT AGREEMENT ON BEHALF OF MY DEPARTMENT. I FURTHER CERTIFY THAT THE DRAFT AGREEMENT IS COMPLETE AND INCLUDES ALL EXHIBITS, ATTACHMENTS AND PAGES.

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| Signed: | Name: |
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A note about our electronic notification system: You and the persons you designate above, if any, will receive automatic status updates via email regarding the contract you have submitted to our office. Among other things, these email notices will inform you of our receipt of your document, the status of its review and its approval and signature by the University as those things occur.

Keep a copy of your agreement and any insurance certificate as part of your Department's records - no one else will.

SEE <http://www.northeastern.edu/general-counsel> FOR GUIDELINES AND FORMS