This form is **not applicable** to RESEARCH CONTRACTS. [Research contract forms](https://www.upei.ca/research-services/forms) are available and submitted via the [Romeo portal](https://upei.researchservicesoffice.com/Romeo.Researcher/).

Contract #:

|  |
| --- |
| PART 1: ORIGINATING UNIT CONTACT INFORMATION |
| Unit:  |   | Submitted by: |   | Date: |   |
| PART 2: CONTRACT INFORMATION |
| Parties: **UPEI &** |   | Start Date |   |
| Contract Title: |   | End Date |   |
| Purpose of the Contract: |   |
| Value of Contract: | $  | Account #: |   |
| **OR** [ ]  new account required |
| PART 3: TYPE OF CONTRACT *(check box and complete the indicated section on the next page)* |
| [ ]  Fee for Service *(Section A)*[ ]  Service *(Section B)*[ ]  Funding *(Section C)* | [ ]  Lease *(Section D)*[ ]  Secondment *(Section E)*[ ]  MOU, MOA & Other *(Section F)* | [ ]  Amendment *(Section G)* |
| PART 4: APPROVALS  |
| *I have reviewed and approved the business terms of this contract and recommend signature by the appropriate Official Signing Officer(s).* |
| Position | Name | Department/Unit | Signature *(check box if email approval)* | Date |
| Account Authority |   |   | [ ]  |  |
| Dean/Director/AVP |   |   | [x]  |  |
| *Additional approvals required:*  | *Contracts equal to or greater than $25,000 requires approval of appropriate VP or President* |
| [ ]  Vice President or President |   |   | [ ]  |  |
| *Additional approvals required:*  | *Contracts equal to or greater than $500,000 requires approval of the President* |
| [ ]  President |  | President’s Office | [ ]  |  |
| PART 5: CONTRACT REVIEW *(do not complete)* |
| Unit | Signature | Date  | Comments *(if space insufficient, attach separate document)* |
| Contract & Insurance | [x]  |  |  |
| Additional review/approval required  *- to be determined by the Contracts & Insurance Office (check box if email approval provided)* |
| ☐ Comptroller | [ ]  |  |  |
| ☐ ITSS | [ ]  |  |  |
| ☐ Privacy | [ ]  |  |  |
| ☐ Human Resources | [ ]  |  |  |
| PART 6: DISTRIBUTION (COMPTROLLER’S OFFICE USE ONLY) |
| ☐ Fundamental Institutional Contract | Fully-signed contract sent to: | ☐ Originator ☐ Procurement ☐ Other:  |
| ☐ Contract forwarded for external signature | Other notes: |
| ☐ Fully-signed contract received |

|  |
| --- |
| **IMPORTANT** - Contracts may only be signed by an **Official Signing Officer** or **Designated Signing Authority** in accordance with the [*Signing Authority Policy*](http://www.upei.ca/policy/adm/fin/gnl/0007). If contract is an Authorized Document signed by a Designated Signing Authority in accordance with a Signing Authority Designation Agreement, then it may be permitted to use the expedited Contract Logging Process *(see Contract Logging Form - C&I Form-008)*. |

|  |
| --- |
| **PLEASE COMPLETE - REQUIRED FOR ALL TYPES OF AGREEMENTS**  |
| Is this contract a renewal, extension or amendment? | [ ]  Yes [ ]  No | Please insert previous or original contract number(s) here:  |
| Is the contract renewable?  | [ ]  Yes [ ]  No |  |
| Is value of contract greater than $100,000? | [ ]  Yes [ ]  No | If yes**:**  Requires two Official Signing Authorities signaturesPlease ensure that the contract includes two signature lines |
| Is the contract for the purchase of software, hardware, technology or technology services? | [ ]  Yes [ ]  No | If yes**:**  ITSS review required. |
| Are we or our contractor collecting or disclosing personal information? | [ ]  Yes [ ]  No | If yes**:**  Privacy review required. |
| Does UPEI require the Contractor to have insurance? | [ ]  Yes [ ]  No | If yes**:**  Attach Contractor’s Certificate of InsuranceIs UPEI named as an additional insured? [ ]  Yes [ ]  No |
| Does the Contractor require UPEI to have insurance? | [ ]  Yes [ ]  No | If yes**:**  Attach Request for Certificate of Insurance Form |
| **SECTION A: FEE FOR SERVICE AGREEMENT**  |
| Is the individual being contracted a UPEI employee? | [ ]  Yes [ ]  No | If yes**:** Contact Human Resources  |
| *Procurement Requirements for Fee for Service and Construction contracts based on the value of the contract:* |
| (1) **Fee for Service** | (2) **Construction *(FM ONLY)*** | **Confirmation of Procurement requirements** |
| [ ]  between $10,000 and $50,000 | [ ]  between $10,000 and $100,000 | [ ]  at least three (3) documented competitive quotes  |
| [ ]  greater than $50,000 | [ ]  greater than $100,000 | [ ]  RFP/RFQ #:  |
| [ ]  Requesting single/sole source in accordance with [*Procurement Policy*](https://files.upei.ca/policy/procurement_policy_admprognl0001.pdf) | [ ] Submit [Non-Competitive Procurement Justification Form](https://portal.upei.ca/facultystaff/administrativeservices/ProcurementServices/Documents/Non%20Competitive%20form%20%28Single%20or%20Sole%20Source%29.docx) |
| **SECTION B: SERVICE AGREEMENT** |
| For Academic Units – Is this a new Service? | [ ]  Yes [ ]  No | If yes**:**  Please consult with your Dean and Finance and attach confirmation of their approval to proceed with offering this Service. |
| **SECTION C: FUNDING AGREEMENT** |
| Is this source of funding: [ ]  Federal [ ]  Provincial [ ]  Other |
| Is this part of a UPEI project?  | [ ]  Yes [ ]  No | Project Name:  |
| Is there another party contributing funds to the same project? (*ie. matching funding*) | [ ]  Yes [ ]  No | If yes**:** (a) Amount: $  (b) Other party(ies):  (c) Has another contract been submitted: [ ]  Yes [ ]  No  |
| Is UPEI contributing funds? | [ ]  Yes [ ]  No | If yes**:** (a) Amount: $  (b) UPEI Account:  |
| **SECTION D: LEASE** |
| ☐UPEI Space. Describe space: ☐External Space. Where is the space located:  |
| **SECTION E: SECONDMENT AGREEMENT** |
| ☐ UPEI Employee being seconded to external organization? **OR** ☐ External organization seconding an employee to UPEI? |
| Is the position 100% seconded?*(\*For (b) if additional space is required, please attach a separate document).* | [ ]  Yes [ ]  No | If no**,** this is a Partial Secondment. Please provide the following:1. Partial secondment percentage: %
2. \*Any particulars related to the partial secondment:
 |
| **SECTION F: MOU, MOA or OTHER AGREEMENTS** |
| If additional information or context would be of help in the review of this agreement, please advise:  |
| **SECTION G: AMENDMENT** |
| Check all changes made and provide details: |
| ☐ Date:  | ☐ Other:  |
| ☐ Value:  |

If there is additional information that is not addressed in this form or you think it may be relevant to the contract review, please attach a separate sheet with the additional information. Additional information assists the individuals reviewing and approving contracts to make decisions more expediently. Thank you in advance for your work and diligence in this matter.