

## CONTRACT ROUTING AND APPROVAL FORM

<b>GENERAL INFORMATION</b>		
Requesting Department _____		
Contact Person _____		
Address _____ _____		
Telephone (____) _____ Fax (____) _____ Email _____		
<b>SUMMARY OF CONTRACT TERMS</b>		
Contract with _____ <span style="margin-left: 100px;">NAME</span>		
Description _____ <span style="margin-left: 100px;">GOODS AND/OR SERVICES TO BE PROCURED, PHYSICAL LOCATION, ETC.</span>		
Dates: Start ____/____/____ End ____/____/____ Renewal ____/____/____ Payment(s) Due _____		
Terms: Payment Period _____ Amount per Period _____		
Total Amount of Contract _____ <span style="margin-left: 100px;">APPROXIMATE IF NECESSARY</span>		
Source of Funds _____ Termination/Cancellation _____		
Authorized Signatory _____ <span style="margin-left: 100px;">IDENTIFY WHO WILL SIGN CONTRACT ON BEHALF OF MU PURSUANT TO MU POLICY</span>		
<b>CHECKLIST</b>		
<i>Complete and attach before sending contract for final signature</i>		
Requirement	Description	Certified Complete By
Contract, Exhibits and Appendices	1) The contract and all documents 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 "Miami University" (not a department or school).	
Name, Address, Contact Person	The full name, address, legal status (i.e., corporation, partnership, etc.) and contact person of other party are included.	
Understanding	Written contract matches the verbal understanding of all parties. All terms and conditions conform to the final negotiations/agreement of the parties.	
Competition/Conflicts and Existing Contracts/ Compliance	This contract does not conflict with any other contracts, promises or obligations of the University. The requesting department verifies the University can comply with all terms and conditions.	
Other Necessary Agreements	All other necessary agreements or waivers referred to in contract have been/will be obtained.	
Indemnification	Miami may not indemnify, hold harmless, be liable to, or reimburse any other party to the contract for claims, lawsuits, damages, attorney fees, or losses incurred by that party in connection with the contract.	
Term of Contract	Start and end dates of contract are included. Any renewals are included.	

<b>CHECKLIST (continued)</b>		
<b>Requirement</b>	<b>Description</b>	<b>Certified Complete By</b>
Warranties/Guarantees	Warranties or guarantees give satisfactory protection.	
Insurance	Risk manager has or will approve insurance clauses.	
Governing Law	The contract is governed under the laws of the State of Ohio. The contract may be silent on this issue but in no event will another state's law govern the agreement.	
Confidentiality Agreements	All nondisclosure clauses include exceptions regarding disclosure as required by law. If not applicable, indicate "n/a."	
Printed/Typed Names	Names of all persons signing contracts are printed or typed below signatures.	
Total Cost Involved	The contact involves \$ _____ {to} {from} (CIRCLE ONE) University.	

<b>CERTIFICATION OF REQUESTING PARTY</b>		
<p>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 obligation (including, for example, scope of work, payment due dates, insurance, and any confidentiality requirements) and all other provisions of this contract, except as noted in any attached memorandum. A memorandum {is} {is not} (CIRCLE ONE) attached.</p>		
_____	_____	_____
NAME	SIGNATURE	DATE
_____		
TITLE		
<b>Entertainment/Speaker contract(s) also require the approval of:</b>		
(Signatures – indicated responsible party has reviewed appropriate conditions, is in agreement, and will provide the services required unless exceptions are noted below.)		
1. Originating Department: _____	_____	DATE
2. Approval (Dean or Vice President): _____	_____	DATE
3. Physical Facilities: _____	_____	DATE
4. Other (i.e. MU Police): _____	_____	DATE
Comments/Exceptions by Responsible Party: _____		
_____		
_____		
_____		
_____		