OGC Contract Approval Cover Sheet		
Submitted by:	Date Submitted:	
Department:		
Email:	Phone Number:	
Additional Contacts:		
1. Full, legal name of the vendor/service provider/other party:		
2. Briefly explain the purpose of the contract and/or services being provided.		
3. State the commencement date for the contract. If this is an agreement for an event, state the date of the event:		
4. Is the contract you are submitting a WPU template agreement? Yes No	4 a. Have changes been made to the contract? If yes, indicate section(s) or paragraph(s) changed:	
4 b. If no to question 4, has the University contracted with this party in the past? (Please attach a copy of the relevant agreement if the University has contracted with this party in the past.) Yes No	5. Have you received approval by the dean of your department and/or department head to pursue this contract? Yes No Approval by (print name):	
I HAVE APPROPRIATE AUTHORITY TO SUBMIT THIS DRAFT AGREEMENT ON BEHALF OF MY DEPARTMENT. I CONFIRM THAT THE DRAFT AGREEMENT IS COMPLETE AND INCLUDES ALL EXHIBITS, ATTACHMENTS AND PAGES.		
Print Name: Sign:	Date:	
Please keep a copy of your agreement and any other supporting documents as part of your department's records. EMAIL TO: OGC@wpunj.edu		

OGC use only:	
Legally Acceptable:	Revisions Needed: