

**Tulane University**  
**Contract Management Services Request Form**

1. Tulane Business Unit or Department making the request:

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2. Contact information of the budget manager for the request:

Name:	Email:
Title:	Phone:

3. Full legal name of the second party to the contract:

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4. Point of contact for the second party:

Name:	Email:
Title:	Phone:

5. Does Tulane have an existing relationship with the second party? ☐ Yes ☐ No ☐ Unknown

6. Please state whether the Tulane Business Unit is:

☐ providing or ☐ receiving ☐ goods or ☐ services under this contract (check all that apply).

7. Please describe the subject matter and purpose of this contract:

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8. If purchasing goods or services, have any alternative providers for these goods and/or services been considered? ☐ Yes ☐ No

9. Will the second party be performing any work on Tulane property? ☐ Yes ☐ No

Please explain:

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10. Will the second party access Tulane networks, systems, or data? ☐ Yes ☐ No

Please explain:

11. Please describe the type(s) of data that Tulane will be providing to the third party (e.g., FERPA, HIPAA/PHI, PCI, research data, personal contact information, email addresses, phone numbers, etc.):

12. Please provide a dollar amount associated with the contract. \$ \_\_\_\_\_

Is this amount: ☐ fixed, ☐ an estimate, ☐ not-to-exceed?

Please describe the payment terms (e.g., milestones, monthly, time-and-materials):

13. Please state the anticipated start date for the contract (must be an exact date at least four weeks after the date submitted). \_\_\_\_\_

If expedited review (< 4 weeks) is requested, please explain the reason for urgency:

14. Please email this form and any contract documents to [contractsupport@tulane.edu](mailto:contractsupport@tulane.edu).