

Pre-approval form for contracts and agreements

Today's Date:// Contract Name:
TSU Contact Person Telephone: Department/Unit:
Agency Contact Person: Telephone:
Estimated cost to TSU: \$ Source of funding:
Proposed contract period: Start date:// End date:// Mo. Date Year (xxxx) Mo. Date Year (xxxx)
 The following Contracts must be Pre-approved by the President's Office (Please check the applicable and provide information where ndicated): Title III Funds - Please indicate the Amount \$
Event Information (Please check the applicable and provide information where indicated): Participants: Faculty Staff Students Gen. Public All Est. number of participants: Location: Location: Provide a brief description of proposed contractual agreement (please limit to 20 characters):
Related Background, Objective and Justification:
Approvals: Provost/Exec. Vice President Dean/Vice President: Signature Date Signature Date
Print Name: Print name: Print name:
Office of the President ONLY Pre-approval form: Approved Not Approved (if not approved, see attached Memo) Signature