

Tennessee State University
Academic Affairs
Preliminary Negotiation of Contract and Agreement Information Form
(Please type information and forward to Provost/Executive VP Office prior to Initial Negotiation)

Contract Name _____

TSU Contact Person _____ Department/Unit _____

Agency Contact Person _____ Telephone # _____

Estimate Cost to TSU: \$ _____ Source of Funding _____

(If Title III, complete page 2)

Proposed Contract Period: Start date _____ End Date _____

Brief Description of Proposed Contractual Agreement:

Proposed Space requirement and location: _____

Any special conditions (i.e., additional staff, fire code, health inspector approval, building commission approval, TBR approval, others) {Please describe}.

Submitted By: _____ Telephone # _____ Date _____

Department Head Approval: _____ Date _____ Dean/Supervisor Approval: _____ Date _____

Provost Office Approval: _____ Date _____

For Title III Accounts Only

Project Name _____

Related Objective and Justification _____

Signature of Requestor

Date

Signature of the President

Date

Title III Approval:

_____ / ____ / _____