

# Contract Cover Sheet

## Office of Student Activities and Service Learning

Please complete and attach to contracts that need to be signed at least two weeks prior to your event.

**Organization:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Program:** \_\_\_\_\_

**Total amount to be paid:** \_\_\_\_\_

**Vendor/Company Contact:** \_\_\_\_\_

**Program Date:** \_\_\_\_\_

**When do you need the contract signed by:** \_\_\_\_\_

(please allow at least 2 weeks)

Advisor Name: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_

PAC Signature: \_\_\_\_\_

Once the contract has been circulated and signed, we will provide you with a copy in your organization mailbox. If we have any questions about the contract, we will contact the person listed on this form.