

Request for Approval of Contractors and Consultants

Internal Use Only Tracking #:

Vendor _____

(name of search firm if know a firm you would like to hire)

Vendor Contact Information Phone _____ Email _____

Department Code _____ Dept Name _____ FAU _____

Contact Name/ Phone Number _____

Description of Services _____

Have you consulted with subject matter expert units (e.g., HR-Talent Acquisition, ITS, Communications, BASC)? Please explain.

Estimated Cost _____ Note 1: If final cost exceeds this estimate by 10%, additional approvals will be needed.
Note 2: If a search firm fee is \$50K or more, must use a competitive bidding process.

If the vendor is a search firm, also provide additional information: Position Title _____
Salary Range _____
Classification _____

Rationale for hiring a search firm: (please explain your efforts to recruit the position in-house)

Do you have approved funding? Yes No Will space be needed? Yes No

Project Name _____

Business Purpose _____

Which Divisional Goal does this project map to? _____

Internal resources cannot be used (check all that apply) Additional skill set needed Workload prevents using internal resources
 Mandated that work be done by external resources Previous recruitment was unsuccessful

Please explain _____

Check box that applies **NON-CONSTRUCTION**
 PSA/ICA (Professional Services/Independent Contractor Agreement)
 PSA/ICA Amendment or Change Order (no cost time extension)
 Purchase Order under an existing contractor/consultant blanket agreement
 Other: _____

Begin Date _____ End Date _____

CONSTRUCTION
 PSA (Design and Construction related)
 EDPA (Executive Design Professional Agreement)
 Construction Contract Begin Date _____ End Date _____
Type: mini
short
long

APPROVALS

1. Departmental Name/Title _____ Signature _____ Date _____
Once signed, send to ucopcontractor@ucop.edu. For search firm, send to Kelly Howard in HR-Talent Acquisition.

2. UCOP Procurement/Purchasing _____ Signature _____ Date _____
(Non-construction contract only)

3. OP Local Human Resources _____ Signature _____ Date _____
(Classification/Displacement/Retiree)

4. Vice President/Vice Provost _____ Signature _____ Date _____
(Up to \$10K if not a Division Head)

5. Division Name/Title _____ Signature _____ Date _____
(Up to \$300K)

6. President Napolitano _____ *Attach signed decision memo to this form*
(More than \$300K)