



Contract Entry Form

This is a request for a: **New Contract** **Renewal/Amendment**
 (If this is a Renewal/Amendment, please skip to Question 11)

Provider's Name:

Please provide the following information (*if you are purchasing goods, please complete the PantherExpress System Standard Form Requisition*):

1. Will these Services be performed outside the U.S.?	Yes	No		
2. In addition to the fee for Services, will expenses be reimbursed to this Provider?	Yes	No		
3. What is the effective start date for this contract?				
4. What is the term of this contract?	Enter #			
		Days	Months	Years
5. Will this contract be funded in whole or in part with Federal funds?	Yes	No		
6. Will any goods/equipment be purchased or supplied in connection with these Services?	Yes	No		
7. In the course of performing the Services, will the Provider's personnel have direct contact with minors?	Yes	No		
8. Will any of the following information/data be disclosed to or created, hosted, maintained or accessed by the Provider:				
(a) Personally identifiable information (PII)?	Yes	No		
(b) Education records covered by FERPA?	Yes	No		
(c) Protected health information (PHI) covered by HIPAA?	Yes	No		
(d) Payment card information (e.g., debit/credit cards)?	Yes	No		
9. Will the Provider be engaged in non-exempt research involving human subjects?	Yes	No		
	If Yes, submit copies of both Pitt's and Provider's IRB approval letters.			
10. Will the Provider be engaged in research involving animal subjects?	Yes	No		
	If Yes, submit copies of each of the following: (i) Pitt's IACUC, (ii) Pitt's IACUC site approval letter, and (iii) Provider's IACUC approval letter.			

11. If this is an amendment to an existing agreement:

(a) What is the existing PO Number in the PantherExpress System?

(b) If extending the Term, what is the renewal term?

Enter #

Days

Months

Years

(c) If revising the payment amount, what is the new payment amount?

(d) Please provide any new terms or revisions occurring with this amendment:

