**Instructions:** Per Board of Regents Policy: [*Reservation and Delegation of Authority*](https://regents.umn.edu/sites/regents.umn.edu/files/2020-02/policy_reservation_and_delegation_of_authority.pdf), the Board reserves to itself authority to approve individual purchases of goods and services with a value greater than $5,000,000, consistent with Board policies.

Complete this form, including all required signatures, and submit it to Purchasing Services by the due date listed on the [Purchasing’s Regent Docket Schedule](https://docs.google.com/spreadsheets/d/e/2PACX-1vSyOpiLm7QN43j5gpGsVRSu_aVYFItDq5HOyJJHoFl7BlCFnO45STk2_RGblv0OGMf7eIi2LG0y02Xr/pubhtml). Purchasing Services will create the Regents Summary document that will be used for Board approval from the information provided below. The department will be asked to review the final draft of the Regents Summary.

**Department contact** (person to contact with questions and final document review):

**Email/Phone:**

1. **General Purchase Information**

Supplier Name(s):

Goods/services being purchased (short description):

Department Name:

Campus Location:  Crookston  Duluth  Morris  Rochester  Twin Cities

(Check all that apply)

One Time Purchase:

Total Contract Value:

Blanket or Time Period Purchase:

Initial Contract Period

Start Date:       End Date:

Dollar amount of initial contract period:

Contract Extension Period (of all possible extensions, if applicable)

Start Date:       End Date:

Dollar amount of contract extension:

Total Contract Value:

Background and support information for the purchase:

Describe how this purchase will benefit students, faculty, enterprise, community:

1. **Supplier selection**

Competitive Process

Brief description of the process for selecting supplier:

Entity who conducted the competitive process:

UMN Purchasing Services  Other:

Total number of suppliers who responded to RFx:

Total number of responding suppliers who are a Targeted Business:

Exception to Bid

This purchase has not been competitive bid because:

The price was determined to be reasonable by:

1. **Funding**

**Source of funds for the purchase:**

(State if this item or services are budgeted for in the current fiscal year, and if not, what funds have been identified. For sponsored projects, simply state “The funds for this purchase are coming from the sponsored project’s budget.”)

1. **Regents Meeting**

Request for approval at Regents meeting in:       (Month/Year)

Who will be attending the Regents Finance & Operations Committee meeting to represent this purchase and answer any questions?

Name of Attendee:

Title of Attendee:

Department Name:

Phone:

Identify any previously submitted docket items or previous Board decisions. Include the dates for these items or discussions.

*See next page for approvals.*

1. **Approvals**

**CONFLICT OF INTEREST:** Signing below certifies that to the best of your knowledge, no elected or appointed official or employees of the University of Minnesota has benefited or will benefit financially or materially from this award. The awarded contract may be terminated by the University of Minnesota if it is determined that gratuities of any kind from the Supplier, its agents, or its employees were either offered to or received by such individuals at the University of Minnesota as may be in a position to influence, directly or indirectly, the solicitation of the supplier.

Use the links below for authorized approvers. Person signing may be someone who has been granted the [delegated authority](https://authority.umn.edu/) to sign contracts or agreements.

* [Chief Financial Managers and Dean/Department Heads](https://docs.google.com/spreadsheets/d/11tfkdjBIjO2pAPxO0BcDid7VLJsHe8CR3BF-ZJy9btU/edit#gid=0)
* [Executive Leadership](https://president.umn.edu/sites/president.umn.edu/files/2020-10/Executive_Leadership_OrgChart_10_2020%20.pdf)

**Requestor:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Typed Name** |  | **University Title** |  |
| **Department Name** |  | **Phone Number** |  |
| **Signature** |  | **Date** |  |

**Chief Financial Manager:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Typed Name** |  | **University Title** |  |
| **Signature** |  | **Date** |  |

**Dean/Department Head or Assistant/Associate VP:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Typed Name** |  | **University Title** |  |
| **Signature** |  | **Date** |  |

**Executive Leadership (Vice President/Senior Vice President/Chancellor):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Typed Name** |  | **University Title** |  |
| **Signature** |  | **Date** |  |

**Director of Purchasing Services (once approved by the Board):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Typed Name** |  | **Date approved by Board** |  |
| **Signature** |  | **Date** |  |