Personal / Professional Services Contract
Data, Selection and Justification Form

Complete Section Below for **All original/new Contracts**

Department of Administrative Services – 10700

1. Agency Contract # _____ (same as the VIP "Justification" number unless the division has a special reason for assigning a different contract number for tracking purposes)

2. Contract Type: (Circle one)
   1 Single Contract
   2 Master Contract
   3 Task Order

3. Approval Code: (Circle one) 1 Delegated Authority 2 Purchasing Approval 3 Exemption

4. Contractor: _____ Phone #: _____ Fax #: _____

   Address: _____ City, State, Zip: _____

5. Purpose Code: _____ (See alphabetical or numerical Purpose Code Sheet)

6. Start Date: _____ End Date: _____

7. Contract Amount: $ _____

8. Division Contact: _____ Phone #: _____ Fax #: _____

Was the Department of Administrative Services Purchasing Vendor Information Program (VIP) used? __Y __N

If the VIP wasn't used:
was the Advocate's Office for Minority, Women and Emerging Small Business notified? ____Y ____N

Does your agency have union representation? ____ Y ____ N

Have you met the requirements of the union contracting-out language? ____ Y ____ N

Why is this contract necessary? What will be accomplished?

Why can't agency employees do this work?

What methodology/rationale was used to establish the compensation?

Was there legislative involvement/direction in decision to contract? (If so, please explain.)

Summary of Selection Process: MANDATORY, describe formal or informal process. If sole source, identify why and cite the appropriate sole source rule.