

THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA SCHOOL BOARD ATTORNEY'S OFFICE

CONTRACT INTAKE & TRANSMITTAL FORM

The School Board Attorney's Office will review the contract/agreement as to form and legality. You are responsible for reading the contract and ensuring that the business and/or program terms and conditions of the contract/agreement are clear, accurate, complete, and will satisfy your business and/or program needs.

CONTRACT DESCRIPTION:

Type of Contract:

Service Agreement, Lease Agreement, License Agreement, Affiliate Agreement or Other (please specify)

Purpose:

School/Location of Activities:

Funds have been identified for these services under Shopping Cart Number:_____

DEPARTMENT/DIVISION INITIATING CONTRACT:

Name and Title:		
Department/Division:		
Phone Number:	E-mail:	
CONTRACTOR/VENDOR/OTHE	R PARTY:	

Company's Name:	
Contact Person and Title:	
Phone Number:	E-mail:

Has MDCSB entered into a similar contract with this company before? \Box Yes \Box No

Is this the renewal of an existing contract? \Box Yes \Box No (If yes, attach a copy of the previous contract. If this is a renewal, extension or amendment to a contract, attach the underlying contract and any previous renewal or amendments, etc.)

DEADLINE:

Date by which contract needs to be reviewed:

PROCUREMENT AUTHORITY:

	Three (3)	Quotes	Obtained
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OR

Professional Services Contract Committee (attach Minutes)

AND

- Board Approval (attach Agenda Item)
- Exemption Pursuant to Florida Statutes (Superintendent authorized to sign contracts up to \$50,000.00 without Board approval)
- Other (state reason):

OTHER INFORMATION:

I or my designee have read the attached Agreement (including all attachments and exhibits), and the contract is an accurate and complete representation of the business/program terms and conditions. (If you are submitting this form electronically, please type your name in the signature field.)

Contract Originator's Signature

Date