

# Service Provider/Consultant Agreement

\*required question

- \*Name of Person Completing Form:
- \*Is this request related to a proposal or a time-sensitive matter?
- \*What is the deadline date?

## Requestor Information

- \*PI Name & Title:
- \*School/College:
- \*Department:
- \*Department Admin Contact:
- \*Please select what is needed for this request:  
-Select "I need a service provider or a consultant on the project" from the dropdown.

## Service Provider/Consultant Information

- \*Name: (Enter the name of the service provider, consultant, sponsor, institution, external party, or pass-through entity.)
- \*Address: (Enter the legal address of the service provider, consultant, sponsor, institution, external party, or pass-through entity.)
- \*Point of Contact Name and Title: (Enter the point of contact name and title of the service provider, consultant, sponsor, institution, external party, or pass-through entity.)
- \*Point of Contact Email: (Enter the point of contact email of the service provider, consultant, sponsor, institution, external party, or pass-through entity.)
- Point of Contact Phone Number: (Enter the point of contact phone number of the service provider, consultant, sponsor, institution, external party, or pass-through entity.)

## Project Details

- \*Project Title:
- \*Funder/Sponsor (This is the Prime Funder of the project):
- \*Coeus Lite Proposal #:
- \*Fund Number:

## Contract Details

- \*Start Date:
- \*End Date:
- \*Where are the services being provided? (Physical address)
- \*Contract Initial Amount: (This amount covers funding on the start date to end date indicated above)
- \*Certification of Funding: (There must be enough funding to cover for this agreement. Please confirm the fund's availability prior to submitting this request.)
  - Select one of the following:
    - 1: I am the PI for this project and I certify that there is sufficient funding on the project to cover this contract.
    2. On behalf of the PI and with their approval, I certify that there is sufficient funding on the project to cover this contract.
    3. Certification not applicable; Drexel is providing a service.
- \*Will intellectual property (IP)/inventions) be created under this agreement?
  - Select one of the following:
    1. No, no IP/inventions will be developed under this agreement.
    2. Yes, the counterparty will create IP/inventions under this agreement.
    3. Yes, both Drexel University and the counterparty will create IP/inventions under this agreement.
- \*Will there be any Drexel, joint, or third-party existing IP (background IP) used in this project?
  - Select all that apply:
    1. Yes, a Drexel patent IP.
    2. Yes, a joint patent IP.
    3. Yes, a third-party patent IP.
    4. No, no patent IPs will be involved.
- \*Publication: Publication of results of this project will be managed as indicated:
  - Select one of the following:
    1. There will not be publication of results of this project.
    2. Drexel will publish the results alone.
    3. Drexel will publish the results and the counterparty to this agreement will co-author such publication.
    4. Drexel and the counterparty will publish the results separately.

- \*Disclosure of Confidential Information: Please indicate if there is confidential information being disclosed and how.

-Select all that apply:

1. Yes, Drexel is disclosing confidential information.
2. Yes, confidential information is being disclosed to Drexel.
3. Yes, confidential information will be mutually disclosed.
4. Yes, confidential information has ALREADY been disclosed.
5. No, confidential information will not be disclosed.

#### Documentation Provided

Attach all applicable documents.

- Scope of Work
- Detailed Budget
- Tax Determination Form (Tax Office IC Approval)
- Budget Justification
- New Agreement Template Provided by the Sponsor
- IRB Approval Letter
- IACUC Approval Letter
- Any Relevant Previously Fully Executed Agreements (This includes any prior CDAs, NDAs, ICAs, etc. related to the request.)
- Governing Agreement
- Additional Comments
- File Upload
- \*By checking this box, I acknowledge that all information given is accurate.
- Send me a copy of my responses.