

COMPLEX PROCUREMENT REC

8K ZD MUST BE COMPLETED IN ITS ENTIRETY

Request Name: _____

Department Name: _____ Contact Name: _____

Contact Phone: _____ Contact Email: _____

Description:

Planned Start Date: _____ Finish Date: _____

Expected Contract Start Date: _____ Expected Contract Term: _____ year(s)

Budget: \$ _____

Compliance: Regulatory
 *Supporting Documentation Company Policy
 Required None Impacted

Department
 Internal Experience: High- Multiple Prior Projects
 Medium- Limited Experience
 Low- Never Done Before

Campuses Impacted: One campus
 Multiple Campuses
 Enterprise Wide

Campus: LSUAM LSUE
 LSUAG LSUHSCNO
 LSUPBRC LSUHSCS
 LSUS LSUHSCD
 LSUA

Strategic Alignment: Advancing Arts and Culture
 (select all that apply) Bridging the Coast, Energy and Environment
 Fostering Research and Catalyzing Economic Development
 Improving Health and Wellbeing

Transforming Education
 Developing Leaders
 Encouraging Career Excellence and Enrichment
 Supporting Student Success

*This form MUST be accompanied with specifications and other supporting documentation.



COMPLEX PROCUREMENT REQUEST
FORM GUIDE

Request Name **B**

Department Name

Contact Name

Contact Phone

Contact Email

Description

Planned Start Date

Finish Date

Expected Contract
Start Date

(This date should be a later date than the finish date associated with the Daptiv project.)

Budget

Expected Term of Contract

Compliance

B

Department Internal **B**

Experience

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COMPLEX PROCUREMENT REQUEST FORM GUIDE

Procurement Method	B	B
Prior Contract/PO #		a
		the date of expiration. <i>(If applicable)</i>
Renewal Options	B	
Bid Request	B	
Cost Savings/Rev. Increase	B	
Business Objective	B	
Master Contract/Cooperative	B	

If, Yes: