

# ADELPHI UNIVERSITY

For Internal Use Only

Date Received: \_\_\_\_\_

Contract #: \_\_\_\_\_

## CONTRACT/AGREEMENT FLOW SHEET

\_\_\_\_\_  
Contract/Agreement Name

\_\_\_\_\_  
Department

\_\_\_\_\_  
Account Number

*I have reviewed the contents of this contract/agreement on the date indicated by my name, and I concur with the statement, capabilities and budget proposed therein. I have also attached a statement describing the contract and its value to the University and verifying budget approval by the appropriate Director, Dean or Vice President.*

- |                          |                 |       |
|--------------------------|-----------------|-------|
| <input type="checkbox"/> | _____           | _____ |
|                          | Director        | Date  |
| <input type="checkbox"/> | _____           | _____ |
|                          | Dean            | Date  |
| <input type="checkbox"/> | _____           | _____ |
|                          | Vice President  | Date  |
| <input type="checkbox"/> | _____           | _____ |
|                          | Budget Director | Date  |
| <input type="checkbox"/> | _____           | _____ |
|                          |                 | Date  |
| <input type="checkbox"/> | _____           | _____ |
|                          |                 | Date  |
| <input type="checkbox"/> | _____           | _____ |
|                          |                 | Date  |