President's Cabinet Approval Request for Consulting Services over \$250,000

Dean or VP signature	Date
College/Unit name	Expected Total Cost
Requested by	Contract Start date
Supplier Name	Contract End Date
Description of Service and specific deliver	erables:
Benefit expected from use of consultant	(include metrics, dollars savings, and improvements):
Provide historic spend with consultant i	ncluding cost, scope, and quality assessment of previous work (2 yrs.):
Please state why an internal OSU depar	tment could not perform work (i.e. Fisher College Consulting):
Impact if service was not performed:	

This completed form and a copy of the proposed contract, engagement letter and/or scope of work should be forwarded to Kelly Des Roches in the Office of Business and Finance at des-roches.1@osu.edu.