



INDEPENDENT CONSULTANT REQUEST FORM SOLE SOURCE JUSTIFICATION

Date:	
Activity Title:	
Activity Director:	Activity#:
Consultant Name:	Consultant Address:
Expected Date(s) of Consultation:	
Method used in procuring consultant: <input type="checkbox"/> sole source offer <input type="checkbox"/> bid	

If sole source, justification for consultant chosen list reasons that this consultant's services are sufficiently unique as to make competitive bidding infeasible:

(attach additional sheet, if necessary)

If bid, list bid criteria:

Purpose for Consultation/Need for Consultant (Please indicate any specific skills to be developed or information to be obtained as a result of this consultation):

Signatures:

Requested By

Date