



## HARVARD PILGRIM HEALTH CARE POST-AWARD SOLE SOURCE JUSTIFICATION

**INSTRUCTIONS:** This form must be completed if the study will (1) use a consultant, vendor or strategic technical partner and (2) multiple informal (over the micro-purchase threshold) or formal (over the simplified acquisition threshold) bids were not solicited. The Uniform Guidance and HPHC Procurement Policy (see Policy & Procedure Grant Related Procurement) require that a PI justify the selection of an entity as the only option for providing the needed services. Submit this completed form to the appropriate Grants Manager in the Office of Sponsored Programs for review and approval. This form must be completed prior to engaging contractually or programmatically with any consultant, vendor or strategic technical partner.

### A. STUDY INFORMATION

1. Title of Project:
  
  
  
  
  
2. HPHC/I Principal Investigator/Degree(s):

### B. SERVICE PROVIDER INFORMATION

1. Name and address of service provider:
  
  
  
  
  
2. What services will they provide?  Consulting     Vendor     Strategic Technical Partner
  
3. Describe why the service provider is the only choice available to complete the needed work on the project and why that work is required for the project. **Include information regarding what research was conducted to reach this determination.**

### C. CERTIFICATIONS

No employee, officer, or agent may participate in the selection, award or administration of a contract supported by a Federal award if he or she has a real or apparent conflict of interest. The officers, employees, and agents of the non-Federal entity may neither solicit nor accept gratuities, favors, or anything of monetary value from contractors. **By providing my signature, I am confirming that I will adhere to the above statement.**

\_\_\_\_\_  
Principal Investigator (signature)

\_\_\_\_\_  
Date