APPENDIX VI – CONTRACTING OUT FORM

In the event contracting out work is deemed necessary by the University, this form must be completed by the Employer and provided to WFSE per Article 47 of the collective bargaining agreement. This notification form is not necessary if the work scope falls within work included on the monthly or annual notification lists provided from UW Facilities to the Union.

Project Details

Project Title __________________________________________ Location of Work * ___________________________

Client Contact (Name) _______________________________ Department __________________________

UW Facilities Project or Work Order #* __________________ Cost Estimate * ___________________________

Description & Scope of Work * Describe the skilled work scope and what work is to be contracted out. Include specific trades involved and an estimate of hours required to complete the work.

____________________________________________________________________________________________________________________________________________

Desired Start Date * ____________________________ Desired End Date ____________________________

What part of work, if any, will be completed by UW Facilities skilled trades employees?

____________________________________________________________________________________________________________________________________________

If this work is associated with a larger project, provide additional information about the project:

____________________________________________________________________________________________________________________________________________

Reason(s) for Contracting Out the Work

Check all that apply *
☐ Emergency situation
☐ Availability of resources
☐ Specialty equipment or expertise needed
☐ Deadline requirement
☐ Other ________________________________
**Additional Information why the work is being contracted out** *Provide additional information regarding the circumstances and situation.*

__________________________________________________________________________________

**Vendor**

Name of Contractor ________________ Duration of Service Contract ________________

**Staff Involved in Discussion to Contract Out** *List bargaining unit members involved in the discussion.*

Name ___________________________ Shop/Trade ____________________________

**Contracting Out Notice Submitted By**

Name * ___________________________ Title* ____________________________

Department * ___________________________ Email * ____________________________