

HENNEPIN-UNIVERSITY PARTNERSHIP (HUP) WORK ORDER

This Work Order, entered into pursuant to the provisions of the Hennepin County and the University of Minnesota Principal (formerly “Master”) Cooperative Agreement (the “Agreement”), is between the COUNTY OF HENNEPIN, STATE OF MINNESOTA, A-2300 Government Center, Minneapolis, Minnesota 55487, on behalf of the Hennepin County **department name and address** (“COUNTY”) and the Regents of the University of Minnesota, a Minnesota corporation, 200 Oak Street Southeast, Suite 450, Minneapolis, Minnesota 55455 (“UNIVERSITY” or “CONTRACTOR”). The provisions herein are incorporated into and made part of the Agreement and are, thereby, subject to the provisions in the Agreement.

1. CONTRACTOR shall perform the following services for **project title: short description of services**. These services are more fully described in the Scope of Services, attached as Attachment A and incorporated by this reference.
2. CONTRACTOR shall perform the services **between start date and end date**. Services shall not extend beyond the term **stated** in the Agreement.
3. CONTRACTOR shall be paid according to the provisions in Attachment A. The total cost of this Work Order shall not exceed **\$xxx**.
4. Pursuant to the Agreement, subcontractors are not permitted without prior written consent of COUNTY.

[IF APPLICABLE, INSERT THIS PARAGRAPH AND THE BAA ATTACHMENT:]

5. CONTRACTOR agrees to comply with the provisions of the Business Associate Agreement, attached as Attachment B.

[IF ANSWER TO Will the University be provided with any Welfare Data under this Work Order? IS YES, INSERT THIS PARAGRAPH:]

6. Pursuant to the Agreement, CONTRACTOR becomes a part of the welfare system of the State of Minnesota in connection with performing services under this Work Order and any information received by CONTRACTOR is presumed to be non-public.
7. Pursuant to the Agreement, either party may cancel a Work Order at any time, without cause, upon thirty (30) days written notice to the other party.

[IF CONTRACTOR IS A SUBRECIPIENT AS DEFINED BY THE UNIFORM GUIDANCE (TITLE 2 CFR PART 200), ATTACH THE SUBRECIPIENT COMPLIANCE ADDENDUM (AVAILABLE ON THE HCAO CONTRACT FORMS WEBPAGE) AND INCLUDE THE FOLLOWING:]

8. CONTRACTOR agrees to comply with the requirements set forth in the attached Subrecipient Compliance Addendum.

[IF ANY FEDERAL FUNDS ARE BEING USED, INCLUDE THE FOLLOWING:]

9. CONTRACTOR agrees to comply with the requirements set forth in the attached Federal Award Contract Provisions Addendum.
10. The primary contacts for this Work Order are:

COUNTY:

Name of County Department/Division:
Name and Title of Work Order Contact:
Phone:
Email:

CONTRACTOR:

University Sponsored Projects Administration (SPA) Contact

Name: Riana Fletcher
Academic Department: Sponsored Projects Administration (SPA)
Phone: 612-624-5856
Email: fletc070@umn.edu

Lead Faculty/Staff Contact (principal investigator) contact:

Name:
Academic Department:
Phone:
Email:

Department administrative contact (for principal investigator's dept):

Name:
Academic Department:
Phone:
Email:

CONTRACTOR may replace the Work Order Contact but shall immediately give written notice to COUNTY of the name, phone number and email of such substitute person and of any other subsequent substitute person.

Any notice affecting the rights or obligations of either party must be directed to the Contract Administrator identified in the Agreement.

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ATTACH THE SCOPE OF SERVICES HERE.

**AS APPLICABLE, ATTACH THE BUSINESS ASSOCIATE AGREEMENT,
SUBRECIPIENT COMPLIANCE ADDENDUM, AND/OR THE FEDERAL AWARD
CONTRACT PROVISIONS ADDENDUM HERE.**

SAMPLE ONLY