**Statement of Work (SOW)**

This Statement of Work is for IT professional services to be provided by the vendor listed in Vendor Information to the agency listed in Requester Information. The parties agree that the terms and conditions of the [**FILL IN CONTRACT NUMBER]** (the “Agreement”) apply to this SOW.

| **Requester Information** |
| --- |
| Requestor Name: |  |
| Agency: |  |
| Project Name: |  |
| Project Description: |  |
| Start Date: |  |
| End Date: |  |

| **Vendor Information** |
| --- |
| Vendor Name: |  |
| Vendor Contact: |  |
| Vendor Contact Phone: |  |
| Vendor Contact Email: |  |

| **Requested Resources** |
| --- |
| **Qty** | **Position Title** | **Experience Level****(Junior/Senior)** | **Work Location** | **Required Skills** |
|  |  |  |  |  |
|  |  |  |  |  |

| **Charges** |  |
| --- | --- |
| **Qty** | **Position Title** | **Experience Level****(Junior/Senior)** | **Total Hours** | **Rate** | **Extended Cost** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total Charges:** |  |

To better adapt to project needs, skills, and other project related factors, **[INSERT AGENCY NAM**E] and Vendor SOW Point of Contact may mutually agree to adjust the number of hours allocated to each position title without requiring a project change request, so long as the adjustments do not exceed the SOW Total Costs and are agreed in writing by both Parties.

| **Additional Requirements [FTI or CJIS Background Check, Must Travel, etc]** |
| --- |
|  |  |
|  |  |
|  |  |
|  |  |

**-------------------- Signature Page Follows --------------------**

**Signatures**

| **SOW Confirmation By Krasan Consulting** |
| --- |
| Account Manager Name: |  |
| Signature: |  |
| Email: |  |
| Date:  |  |

| **Signatures**  |
| --- |
| Project/Department Manager: |  |
| Division Head: |  |
| Krasan Executive Name: |  |
| Krasan Executive Signature:  |  |
| Date: |  |