

**EXHIBIT A
STATEMENT OF WORK**

This Statement of Work is entered into pursuant to the Condensed Vendor Master Services Agreement between _____ (Vendor) and Trinity University (Trinity).
Except as otherwise expressly agreed in this Statement of Work, all terms and conditions set forth in the Condensed Vendor Master Services Agreement dated _____ shall govern.

Department and Individual Requesting Vendor Professional Services:

Professional Services/Deliverables:

Term – Start Date: _____ Completion Date: _____

LOCATION: _____

If on campus, specify where: _____

DATE: _____

START TIME: _____ END TIME: _____

Compensation: _____

IN WITNESS WHEREOF, the parties have executed this Statement of Work by their duly authorized officers or representatives as indicated by their signatures below, effective as of the last date signed.

Vendor

Trinity University

Signature

Signature

Name

Name

Date

Date

This Exhibit is hereby incorporated into the Vendor Condensed Master Services Agreement between Trinity and Vendor.