EXHIBIT A STATEMENT OF WORK

This Statement of Work is entered into	pursuant to the Vendor Master Services Agreement between (Vendor) and Trinity University (Trinity)
dated	(Vendor) and Trinity University (Trinity). Except as otherwise expressly agreed in this Statement of Work, al
terms and conditions set forth in the Vendor M	aster Services Agreement shall govern.
Department and Individual Requesting Vendor	Professional Services:
Professional Services/Deliverables:	
Term – Start Date and Completion Date: Start Date:	
Completion Date:	
LOCATION:	
If on campus, specify where:	
DATE:	
START TIME:	END TIME:
Compensation:	
IN WITNESS WHEREOF, the parties have exor representatives as indicated by their signature. Vendor	Recuted this Statement of Work by their duly authorized officers res below, effective as of the last date signed. Trinity University
Signature	Signature
Name	Name
Date	Date

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