|  |  |  |  |
| --- | --- | --- | --- |
| Reason for Selection  MM DD YYYY | | | |
| Spending Budget Type |  | Researcher |  |
| Planned Supplier |  | | |
| Content (For a product purchase, enter the manufacturer's name, standard, dimensions, etc.; and for a service, enter a description of the service, date/time, and other details of the request.) | | | |
| Reasons for the selection of this supplier (Provide specific information) | | | |

\*Attach materials that provide evidence of the reason for your selection.

Submission of a “Reasons for Selection” does not guarantee identification of the ordering company. If there is no “Exclusive Sales Certificate” or “Direct Sales Certificate” from the vendor, price verification such as price quotation matching is required. Depending on the amount of the order, the Research Office or the Contract Office will determine the supplier after a thorough review.

|  |  |
| --- | --- |
| Budget Unit | |
| Responsible official | Person in charge |
|  |  |

Division of Research Form 1-6, April 2025 Version