



WICHITA STATE
UNIVERSITY

CONTRACT AWARD

Date: July 1, 2017
Change Date: July 1, 2022

Contract Number: W0001394

Procurement Officer: Robby Murray
Telephone: (316)978-5185
E-mail Address: robby.murray@wichita.edu

Item: Dining Services Management

Period of Contract: July 1, 2017 through June 30, 2025
(Renewal 3 of 5)
With the option to extend for four additional one-year terms upon written mutual agreement of both parties. The contract may be terminated at any time by either party with or without cause, upon 120 calendar days' written notice. The termination shall be effective at the end of an academic year, which is defined as summer, fall, and spring semesters.

Department: Wichita State University, Office of Student Affairs
1845 Fairmount, Campus Box 95
Wichita, KS 67260-0095
Teri Hall, Vice President for Student Affairs

Wichita State Union Corporation
1845 Fairmount, Campus Box 56
Wichita, KS 67260-0056
Kevin Konda, Executive Director of RSC

Contractor: Compass Group USA, Inc.
2 International Drive
Rye Brook, NY 10573
Banner ID number X10002973

Campus Contact:

Chartwells
c/o Wichita State University
1845 Fairmount St, Campus Box 202
Wichita, KS 67260-0202
Jamie Kraisinger
Jamie.kraisinger@compass-usa.com

Chartwells Higher Education Division
2400 Yorkmont Rd.
Charlotte, NC 28217
Attn: John Laird
Cell: 281-755-7083

PURPOSE OF CONTRACT:

This contract shall cover Dining Services for Wichita State University during the contract period referenced above. This shall include the exclusive rights to manage and operate Contract Board services, Retail Dining and Convenience Store services, Catering Services in the Shocker Dining Hall on the main campus. University approved preferred caterers shall have the right to operate in the Rhatigan Student Center and other locations on campus, but shall not be permitted to utilize the food storage and food preparation facilities utilized by the Contractor. Please read Policy & Procedure Manual Chapter #20.16 for more details. The Contractor has the right to utilize its assigned Premises to cater non-University events held off-campus, provided it does not conflict with the performance of this contract.

In addition, Contractor shall have exclusive rights to manage and operate Summer Camp/Conferences Food Service at Shocker Dining Hall; exclusive rights to manage and operate vending services of snacks, hot beverages, and fresh foods on campus; and shall enter into a separate contract agreement with the WSU Child Development Center; and provide the necessary services, functions, and responsibilities not specifically retained by WSU.

Over the term of the Agreement, the University and Contractor may mutually agree upon other services and/or service locations as necessary. Any additional services or service locations shall first be memorialized by a written amendment signed by all the parties.

Contractor shall be prohibited from providing the following services unless contracted under a separate Agreement:

Athletic Concessions Food Service
Shocker Sports Grill & Lanes in the Rhatigan Student Center
Bookstore sales of prepackages snack and beverages
Innovation Campus Food Service including the Food Truck Parking Area

This is a summary of the contract between parties. Additional detail may be sought through WSU General Counsel as agreed to in the contract.

The contractor shall submit invoices to the University for all amounts due from University under the Agreement at the end of each week. Payments by the University shall be paid weekly and not more than thirty (30) calendar days after the receipt of the invoice, provided the invoice is complete and accompanied by full documentation.

Please find the following revised ICD information sheet that needs to be completed and sent to Fiffy Petty at Box 47 or email to Phyllis.petty@wichita.edu for each catering event that you reserve from Chartwells Dining. This information sheet needs to be completed for each event, regardless of the funding source.

Wichita State University Chartwells Catering Information for ICD

**Please fill out completely and submit to the
Department of Finance & Administration prior to the event if possible.
Fax # 978-3151 or Campus Box 47**

ICD No. _____
For Office Use Only

*This form is to be used for **all** catered events, regardless of funding.*

Department Contact Person:	Email: Extension: Box Number:
Method of Payment (check one): <input type="checkbox"/> State Funds <i>(GU or RU)</i>	Fund Number: Organization Name: Organization Number:
<input type="checkbox"/> Foundation Account <i>If invoice is to be paid by a Foundation Account, Service Fund, etc., the invoice will be forwarded to your department for processing.</i>	
<input type="checkbox"/> Fees were collected for this specific event.	
Purpose of Event:	Date of Event:
Location of Event:	Number of Participants: <i>Names of participants <u>are required</u> if less than 20. Please specify if the participant is a student, faculty/staff member, or from the outside community.</i> <i>*Note: If paying with Foundation funds, participation list is required unless the event is open to the public.</i>

Please include a flier/handout advertising the event if one is available.