

## CONTRACT WORK ASSIGNMENT (W.A.)

Contractor: \_\_\_\_\_

Contract No: \_\_\_\_\_

W.A. No: \_\_\_\_\_ Modification No: \_\_\_\_\_

W.A. Title: \_\_\_\_\_

W.A. Originator: \_\_\_\_\_ Date Prepared: \_\_\_\_\_

Contracted Work Area: \_\_\_\_\_

=====

### Part I. INITIATOR'S REQUEST

A. Period of Performance: From \_\_\_\_\_ to \_\_\_\_\_

B. Work Assignment Description:

C. Work Assignment Leader: \_\_\_\_\_

D. Deliverables:

E. W.A. Response Due Date: \_\_\_\_\_

**CONTRACT WORK ASSIGNMENT (W.A.)**

Contractor: \_\_\_\_\_ Contract No: \_\_\_\_\_

W.A. No: \_\_\_\_\_ Modification No: \_\_\_\_\_ Date Prepared: \_\_\_\_\_

=====  
**Part II. CONTRACTOR'S RESPONSE TO W.A. REQUEST**

(\*The Contractor shall attach a detailed budget to this form to identify all proposed costs.)

A. Estimated Cost and Effort:

1. Labor hours - list W.A. leader, specific individuals to be assigned, labor category, and estimated hours for each.
2. Labor costs - list by labor category and total.
3. Employee benefits.
4. Direct materials
5. Travel
6. Subcontracts
7. Other direct costs
8. Indirect costs
9. Total estimated costs for this Assignment: \_\_\_\_\_\*

B. Detailed description of the approach to be used and of the deliverable(s). (Be specific.):

=====  
**APPROVAL TO PROCEED:** The Contractor shall not exceed the estimated labor hours, estimated W.A. amount, or change the W.A. leader without the prior written approval of the Project Officer and the Contracting Officer.  
=====

1. For the Contractor: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Typed name: \_\_\_\_\_

2. For the Government: \_\_\_\_\_ Date: \_\_\_\_\_  
Contracting Officer Technical Representative  
(COTR)

\_\_\_\_\_ Date: \_\_\_\_\_  
(Contracting Officer)

**CONTRACT WORK ASSIGNMENT (W.A.)**

Contractor: \_\_\_\_\_ Contract No: \_\_\_\_\_

W.A. No: \_\_\_\_\_ Modification No: \_\_\_\_\_ Date Prepared: \_\_\_\_\_

=====  
**Part III. CONTRACTOR'S REPORT OF W.A. PERFORMANCE**

(\*The Contractor shall attach a detailed itemization of costs to this form to identify all expenditures under this W.A.)

A. Actual Cost and Effort:

1. Labor hours - list specific assigned individuals, labor category, and actual hours worked.
2. Labor costs - list labor category, individual, and total amount.
3. Employee benefits
4. Direct Materials
5. Travel
6. Subcontracts
7. Other direct costs
8. Indirect costs
9. Total costs for this W.A: \_\_\_\_\_

B. Report of Progress and/or Deliverables:

=====  
**REVIEW AND APPROVAL OF SATISFACTORY PERFORMANCE**

The signatures below indicate that the services/products required under Work Assignment No. \_\_\_ have been delivered, received and satisfactorily meet the requirements of this Work Assignment.

=====  
1. For the Contractor: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Typed name: \_\_\_\_\_

2. For the Government: \_\_\_\_\_ Date: \_\_\_\_\_  
Contracting Officer Technical Representative  
(COTR)

\_\_\_\_\_  
(Contracting Officer) Date: \_\_\_\_\_