

STANDARD SERVICES CONTRACT

For Independent Contractors who are NOT Current Lamar Employees

With few exceptions you have the right to request, receive, review and correct information about yourself using this form

The undersigned Contractor(s) and Purchaser agree to the following terms and conditions for the provision of services, herein described below, by the contractor(s):

- (1) Date of Agreement: _____
- (2) Contractor name: _____
 Home Address: _____
- (3) Name of Purchaser: Lamar University
- (4) Description of Services: _____

(5) Dates & Times of Contracted Services:

DATE(S)	TIME	# of HOURS
TOTAL NUMBER OF HOURS		

(6) Amount Due for Contracted Services:

TOTAL NUMBER OF HOURS	\$/HOUR	TOTAL DUE	OR	FLAT FEE

(7) Taxpayer ID# or SS# as shown on attached W-9 form **(required if payment is to be made to Contractor)**: _____

(8) Amount Due for Additional Expenses **(Invoice and/or original receipts attached)**

EXPENSE(S)	ESTIMATED EXPENSE TO BE COVERED BY LAMAR/FACULTY	ESTIMATED EXPENSE TO BE REIMBURSED TO CONTRACTOR
Hotel		
Airfare/Car Rental/ Mileage		
Meals		
Other:		
TOTAL ADDITIONAL EXPENSES	\$	\$

(9) TOTAL AMOUNT DUE FOR CONTRACTED SERVICES AND EXPENSES

Amount Due for Professional Services (From 6)	+	Total Additional Expenses to be Reimbursed to Contractor (from 8)	=	TOTAL PAYMENT DUE CONTRACTOR

It is understood that the contractor(s) executes this agreement as an independent contractor and is **not** an employee of the Purchaser and that the contractor(s) shall have the exclusive control over the means, method, and details of fulfilling the obligation under this contract, except for the dates that the services are to be performed.

The contractor(s) agrees to perform and discharge all obligations as an independent contractor under any and all laws, whether existing or in the future, in any way pertaining to the engagement hereunder, including but not limited to Social Security laws, Workman's Compensation Insurance, Income Taxes, State Employment Insurance taxes or contributions, Public Liability Insurance; and contractor(s) will hold Purchaser harmless against any such laws as well as against Union claims for welfare payments. Contractor(s) understands and agrees that the purchaser will make no payments for health insurance or other employee benefits. Any controversies arising between the contractor(s) and the Purchaser pertaining to this contract shall be resolved by the Courts of the State of Texas in the County of Jefferson.

The Purchaser, in signing this contract warrants that he/she signs as a properly authorized representative of Lamar University/Lamar Institute of Technology and does not assume any personal liability for meeting the terms of the contract.

The payment for the above-described services will be reported at calendar year-end on a 1099 MISC to the Internal Revenue Service. The contractor(s) copy of the 1099 will be mailed to the address as listed above.

Signed: _____
 @ Contractor oDate Department ° o Date

Attach this completed form to a F4.7 and a W-9 and forward to Accounts Payable

 Contract Administrator o Date