

INDEPENDENT CONTRACTOR SERVICES AGREEMENT

This Independent Contractor Services Agreement (*hereafter "the Agreement"*) is entered into between the Board of Regents of the University of Wisconsin System d/b/a the University of Wisconsin - La Crosse (*hereafter "University"*) and the contractor set forth below (*hereafter "Contractor"*). See the link in the Contractor Acceptance section for terms and conditions. Changes to the terms and conditions require **prior written approval** by the University.

CONTRACTOR INFORMATION

Contractor's Name:

Business Name (if applicable):

Address:

City/State/Zip:

Are you employed by UW System? NO YES (Contact HR for guidance)

SERVICE PERIOD

| Beginning Service Date | Ending Service Date | Location (Building, Room) | UWL account to be billed |
|------------------------|---------------------|---------------------------|--------------------------|
| | | | |

MANDATORY--SCOPE OF SERVICE (Identify type of service and any conditions. Attach appendix if needed):

| PAYMENT TERMS | LIAISON | | |
|--|--|--|---|
| Payment will be made within 30 days of completion of services. For multiple payment dates please indicate below the payment dates with payment amounts. | Represents the University's interest and related considerations as outlined in this agreement. Liaison's Name: Department: Email: Telephone: | | |
| COMPENSATION INFORMATION | | | |
| <table> <tr> <td data-bbox="110 504 847 886"> Fee not to exceed: Travel expense to be <u>Direct Paid</u> by the University: (list expense and not to exceed amount, examples-hotel, airfare, hosted meals). </td> <td data-bbox="847 504 1562 886"> Travel expenses to be <u>e-Reimbursed</u> to Contractor: (list expense and not to exceed amount, examples-hotel, airfare, per diem meals). </td> </tr> </table> | | Fee not to exceed: Travel expense to be <u>Direct Paid</u> by the University: (list expense and not to exceed amount, examples-hotel, airfare, hosted meals). | Travel expenses to be <u>e-Reimbursed</u> to Contractor: (list expense and not to exceed amount, examples-hotel, airfare, per diem meals). |
| Fee not to exceed: Travel expense to be <u>Direct Paid</u> by the University: (list expense and not to exceed amount, examples-hotel, airfare, hosted meals). | Travel expenses to be <u>e-Reimbursed</u> to Contractor: (list expense and not to exceed amount, examples-hotel, airfare, per diem meals). | | |

CONTRACTOR ACCEPTANCE:

I agree to the standard terms and conditions which are found at <https://www.uwlax.edu/globalassets/offices-services/business-services/forms/standard-terms-and-conditions.pdf>, and also the UW System Purchasing Terms and Conditions which are found at <https://shopuwplus.wisc.edu/uw-system-purchasing-terms-and-conditions-2/> I verify that I am duly qualified and willing to perform the services as an independent contractor. The fees under this Agreement do not exceed my normal and customary rate. I certify, under penalty of perjury, that the Social Security Number or Federal Employer Identification Number provided on my W-9 is correct, that I am not subject to backup withholding due to failure to report interest and dividend income, and that I am a U.S. person. I am not a current University of Wisconsin System employee nor have I been a UW System employee during this calendar year.

Signature: _____

Name Printed or Typed

Title:

Email Address

Phone Number:

FOR THE BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM D/B/A THE UNIVERSITY OF WISCONSIN-LA CROSSE:

Signature - Kurtis Bock, Procurement Director
AND/OR

Date

Signature - Robert J. Hetzel, Vice Chancellor for Administration & Finance

Date

BUSINESS SERVICES

University of Wisconsin-La Crosse • 125 Graff Main Hall • 1725 State Street • La Crosse,
 WI 54601 (Phone) 608-785-8554 • (Fax) 608-785-8544 •
 (Web) <https://www.uwlax.edu/business-services/>