Hofstra University

Contract Information Form
(to be attached to all proposed contracts)

1. VENDOR/CONTRACTOR INFORMATION:
   Contractor
   Name 1: __________________________________________________________
   Address: ____________________________________________________________
   Telephone No.: _______________________________ Fax No.: __________________

2. UNIVERSITY ORIGINATOR OF CONTRACT: (Person most familiar with details and responsible for implementation)
   Name: __________________________________________________________________
   Title: ___________________________ Telephone No: ________________________

3. BRIEF EXPLANATION OF CONTRACT (including benefit to University):
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________

4. HOW WAS VENDOR SELECTED? (explain prior work performed for University, Relationship to University, etc.)
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________

!Complete, accurate contractor name must appear on contract. If the vendor is a corporation, the contract must be signed by a corporate officer indicating he/she is an officer having authority to sign on behalf of the corporation.
5. COMMENCEMENT DATE (work may not commence until contract is executed and insurance certificate received and approved): ______________________________________

6. TERM OF CONTRACT: ________________________________________________

7. COST OF CONTRACT: ________________________________________________

8. BUDGET APPROVAL: 
   (indicate budget codes): ______________________________________________

9. IS THE CONTRACT ON A STANDARD HOFSTRA UNIVERSITY FORM?
   
   Yes__________   No__________

10. HAS THE STANDARD FORM OF CONTRACT BEEN ALTERED IN ANY WAY?

   Yes__________   No__________

11. ARE REQUIRED INSURANCE CERTIFICATES ATTACHED?

   Yes__________   No__________

12. SHOULD SIGNED CONTRACT BE RETURNED TO DEPARTMENT, OR SENT TO VENDOR OR SOMEWHERE ELSE? (specify below)

   ________________________________________________________________
   ________________________________________________________________

13. ADDITIONAL COMMENTS: _________________________________________

   ________________________________________________________________
   ________________________________________________________________

PREPARED BY: __________________________   DATE: ______________________
REQUIRED FOR ALL CONTRACTS WITH AN INDIVIDUAL

Please complete this checklist in order to assist us in determining whether an individual is appropriate for a consultancy relationship with Hofstra. This checklist is not exhaustive and it is not necessary to satisfy each factor.

NAME OF INDEPENDENT CONTRACTOR: ____________________________________

☐ Independent Contractor is not currently an EMPLOYEE or a STUDENT of Hofstra University. (EMPLOYEES and STUDENTS of Hofstra University may not be hired as an Independent Contractor, STOP HERE)

☐ Independent Contractor is not a former employee of Hofstra University.

☐ Independent Contractor operates as a business and holds itself out to the public as a provider of the type of services it is performing for Hofstra University.

☐ Independent Contractor does not require any training by Hofstra nor does Hofstra provide any training to Independent Contractor.

☐ Independent Contractor performs some or all of the services or project at a location outside of Hofstra’s premises.

☐ Independent Contractor supplies his/her own equipment or materials.

☐ Independent Contractor has the right to control the day-to-day aspects of the project, as well as the manner, method and means by which the project is completed, including delegation to its own staff, setting work hours, etc.

☐ Independent Contractor invoices Hofstra University in order to be paid for services.

☐ Independent Contractor is not held out to third parties as an employee of Hofstra University.

☐ Project involves an area or a service where outsourcing to nonemployees is customarily recognized as acceptable and common in the educational industry.

☐ Independent Contractor’s project or services involves something not traditionally performed in house by employees of Hofstra.

☐ Independent Contractor is not required to report to anyone at Hofstra or attend regular department meetings and makes his/her own schedule.

☐ Independent Contractor is free to perform similar work for others as well as for Hofstra.

☐ Hofstra has little or no management or supervision of Independent Contractor for this project.

☐ Independent Contractor is not provided a Hofstra ID, Hofstra email address or an office on Hofstra’s premises.

Comments: ____________________________________________________________

By signing below, I hereby certify that I have completed or reviewed the contents of this checklist on the date indicated by my name, and I attest to the accuracy of the contents of this checklist.

SIGNATURE OF UNIVERSITY OFFICIAL: ___________________________ DATE: ______

PRINT NAME: ________________________________

TITLE: ________________________________