

**CONTRACT INFORMATION FORM**  
(Must be submitted with all proposed contracts)

**1. VENDOR/CONTRACTOR INFORMATION<sup>1</sup>:**

TAX ID number of person or company. Leave blank if guest lecturer volunteer

Name:           The name of person / company rendering services           Vendor 700#: \_\_\_\_\_

Address:           The address of person / company rendering services          

*For fields below: Telephone, Fax and Email or person / company rendering services*

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_ Email: \_\_\_\_\_

**2. UNIVERSITY ORIGINATOR OF CONTRACT:**

*(Person most familiar with details and responsible for implementation)*

Name:           Your name AND name of OSLE or Fitness Center Administrator          

Title:           Your position AND your OSLE or Fitness Center Admin's Title           Telephone No: \_\_\_\_\_

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

          Explain what the services the person / company will be providing.          

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

          Explain how the person / company was selected          

**5. CONTRACT COMMENCEMENT DATE** *(work may not commence until contract is executed and insurance certificate received and approved):*           The date the person / company will render their service          

**6. TERM OF CONTRACT:**           Date/time when rendered services will begin and end. Example: 10/16/2017 - 6 pm - 7:30 pm          

**RENEWAL OPTIONS** (Check one if necessary): Auto Renew \_\_\_\_\_ Other \_\_\_\_\_  
*If this is a one time contract leave blank.*

**7. VALUE OF CONTRACT:**           Total cost of this contract. Enter \$0 if a guest volunteer          

**8. BUDGET CODES:** Fund: \_\_\_\_\_ Org: \_\_\_\_\_ Account: \_\_\_\_\_ Budget Year: \_\_\_\_\_  
*Graduate groups enter the 15 digit budget number. Undergraduate groups - leave blank.*

**9. IS THE CONTRACT ON A STANDARD HOFSTRA UNIVERSITY FORM?** Yes \_\_\_\_\_ No \_\_\_\_\_

**HAS THE STANDARD FORM BEEN ALTERED IN ANY WAY?** Yes \_\_\_\_\_ No \_\_\_\_\_

*Check 'Yes' if you are using a university contract form. 'No' if you are attaching the vendor's contract form*

**10. REQUIRED INSURANCE CERTIFICATES ATTACHED?** Yes \_\_\_\_\_ No \_\_\_\_\_

**CERTIFICATE EXPIRATION DATE:** \_\_\_\_\_

*Needed if person/company brings equipment to campus or their services rendered off campus. Insurance certificates are not needed for guest speakers.*

**11. NAME(S) AND EMAIL ADDRESS(ES) OF PERSON(S) TO WHOM EXECUTED CONTRACT SHOULD BE RETURNED:**

          Name & email of OSLE or Fitness Center Administrator          

**12. ADDITIONAL COMMENTS:** \_\_\_\_\_

**13. PREPARED BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

          Leave blank OSLE / Fitness Center Administrator will fill in this section          

<sup>1</sup> 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.

**CONTRACT INFORMATION FORM**  
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**INDEPENDENT CONTRACTOR CHECKLIST**  
**(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: **Fill this out ONLY if a person (not a company) is rendering services.**

- 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)**

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

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- 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.

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

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

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

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- 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.

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

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

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

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

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

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

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

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- 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: \_\_\_\_\_ **To be signed by OSLE / Fitness Center Administrator** DATE: \_\_\_\_\_  
PRINT NAME: \_\_\_\_\_  
TITLE: \_\_\_\_\_