



INDEPENDENT CONTRACTOR TERMS OF AGREEMENT

Part One: University Information (“University” or “KSU”)

Contracting University Department/Office: _____

Contracting Party (University Employee/Title): _____

Campus Address: _____

Phone: _____

Email: _____

Part Two: Independent Contractor Information (“Contractor”)

Name: _____

Individual: Business: (mark one)

Address: _____

Phone: _____

Email: _____

Part Three: Scope of Engagement

Description of specific services and deliverable to be provided under this Agreement (please attach additional pages if necessary). Also include any Special Requirements/Certifications required to be held by the Contractor during the term of the Agreement.

Total Fee for Services Provided and Payment Schedule:

Term of Agreement: _____ (starting date) to _____ (ending date), (not to exceed 180 days).

INTENDING TO BE LEGALLY BOUND, the parties hereto have caused this Agreement to be executed by their duly authorized officers, mutually agree on the terms, and further agree to the “Additional Terms,” available at: <https://www.kent.edu/hr/independent-contractor>.

FOR KENT STATE UNIVERSITY:

FOR CONTRACTOR:

Name (Print or Type)

Name (Print or Type)

Signature

Signature

Date

Date

Vice President/Dean or Authorized Delegate Signature

Date