Speakers Board- Contract Accounting Form 2014-2015

ONLY FILL OUT THIS FORM IF YOU HAVE GOTTEN A CONFIRMATION EMAIL THAT YOUR PROPOSAL WAS APPROVED.

This form is to request accounting services for your approved grant. We strongly prefer to do all accounting for personal service contracts using Speakers Board funds.

Personal service contracts take a minimum of 20 business days to process. If the information you provide is too close to the event date or is incorrect, you may lose your grant. All travel associated with a contracted speaker/performer must be part of the personal service contract. An honorarium over \$5000, is more than one day of events, or is with an international speaker requires 30 business days to process.

Contract Request

[Required] Name of person organizing the event and payment logistics This should be the person who can best answer questions about the event specifics. Valid input: - must be 10-15 digits long and may include only numbers, hyphens, and spaces name@myschool.edu
First name: Middle initial: Last name: Email address: Phone number: Address: City: State: ZIP:
[Required] Has anyone already started a contract for this performer/speaker for this event? SALP would prefer to handle all contracting. However, if someone has already started a contract, we cannot create a second contract for the same contractor at the same event.
[] Yes [] No
[Required] Legal name of the contractor
[Required] This contractor is a: Valid input: - Select only one choice must select a value.
US Corporation/ Business I US Citizen/ Legal Resident I Foreign Corporation I Foreign Citizen
[Required] Email of the contractor Valid input: - name@myschool.edu
[Required] Date or Dates of service, Start Time, Stop Time, and location of the of the event
[Required] Complete Address and Phone Number of Contractor
Name of Event

Please let us know of anything that may need to be added to the contract including specific expectations to the speaker/performer.
[Required] Are there other departments/groups contributing funding to this contract?
[] Yes [] No
If you marked yes above: Please list the departments/groups with how much they are contributing, the index code, and the name and number of the department/group contact.
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