

**ST. NORBERT COLLEGE
INDEPENDENT CONTRACTOR AGREEMENT**

NOTE: An EMPLOYEE OF St. Norbert College, or a former employee (paid by the College within the last 12 months) CANNOT be an independent contractor without PRIOR approval from the Payroll Manager.

This agreement is entered into by and between _____ ("Contractor"), and St. Norbert College ("SNC Purchaser").

Nature of Services to be Performed:			
Description _____ _____			
Date _____	to _____	Time _____	Place _____
Payment will be in the form of a check payable to _____			
Date of Payment _____ (No advance payments will be made.)			

Amount Payable			
Services _____			
Lodging _____	Meals _____	Transportation _____	Other _____
Total _____			
Fund	Org	Acct	Prog
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Contractor Information			
Legal Name or Business Name _____			
Select one: <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____			
Social Security # or Employer Identification # _____			
Mailing Address _____ _____			
SNC Purchaser telephone extension _____			

The contractor shall be responsible for all expenses incurred in providing services under this contract, except as specifically agreed on in writing by the parties. The contractor shall use its own equipment, supplies, and all other items necessary for the performance of its services under this contract. The contractor shall not be covered by the College's workers' compensation insurance, be entitled to claim workers' compensation from the College, nor be eligible for any benefit programs offered by the College to its employees. Both parties acknowledge that the contractor is an independent contractor, as that term is defined under all local, state, federal and common laws. The contractor is solely responsible for any and all required taxes and withholdings for services rendered under this contract. Exception: Wisconsin law requires "nonresident entertainers" to file a bond or cash deposit if the accumulative total contract price for a performance(s) in Wisconsin exceeds \$7,000. If the nonresident entertainer or public speaker does not show proof of this occurrence, state law requires that the College deduct 6% of the total contract price and remit said amount as withheld for state income tax purposes. For Non-resident aliens the College is required to withhold and submit 30% of the contract price to the federal government unless a tax treaty is claimed on form W-8Ben.

IN WITNESS WHEREOF, the parties have caused this agreement, dated this _____ day of _____, 20__.

SNC Purchaser _____
Signature _____
Title _____
Address St. Norbert College, 100 Grant Street
DePere, WI 54115
Date _____

Contractor _____
Signature _____
Title _____
Address _____
Date _____