



**THE SCHOOL BOARD OF HOUSTON INDEPENDENT SCHOOL DISTRICT
PROFESSIONAL SERVICE AGREEMENT FORM**

THIS AGREEMENT, entered into this ___the day of _____, 20___, by and between the School Board of Houston Independent School District, hereinafter referred to as the "District", and _____, hereinafter referred to as the "Professional Service Firm", is as follows:

- The Professional Service Firm shall, in a satisfactory and proper manner as determined by the District, perform the services shown in the Professional Service Firm proposal and attached as Exhibit A to this contact. All proposals shall state specific deliverables and timelines for performance.
- The Professional Service Firm shall commence performance of the Agreement on the ___the day of _____, 20___, and shall complete performance to the satisfaction of the District no later than the ___day of _____, 20___. If the Professional Service firm does not perform to the satisfaction of the District, the District may terminate this agreement by providing written notice to the Professional Service firm by first class mail at the address shown below, or by oral notice.

3.

FEES AND BUDGET			
Professional Service Fees			
_____ Hours at	\$ _____	per hours	\$ _____
_____ Days at	\$ _____	per day	\$ _____
Transportation (receipts required)			\$ _____
Lodging (receipts required)			\$ _____
Meals (receipts required)			\$ _____
Miscellaneous (list)	_____		
	_____		\$ _____
	_____		\$ _____
Total Fee			\$ _____

Business Area	Commitment Item (Function-Object)	Funds Center (Org.# - IA - Project)	Fund
Budget Account Number	6219		

- Method of payment: Indicate below when and in what amounts the total due under this contract is to be paid

- The Professional Service Firm agrees to assume responsibility for all per diem and travel expenses, unless authorization to incur such expenses is granted by the District in advance of the expenditures being incurred. The Professional Service Firm shall be reimbursed for such approved expenditures as provided by Board Policy.

NOTICE TO PROFESSIONAL SERVICE FIRM: ANY CHANGES MADE IN PROVISIONS ABOVE WILL NULLIFY AGREEMENT.

HOUSTON INDEPENDENT SCHOOL DISTRICT

SIGNED (PROFESSIONAL SERVICE FIRM)

NOTE: Professional Service Firm is not to sign this form until approved by the Accounting Department.

If over \$25,000
Board Agenda # _____ Date _____

Requestor _____ Date _____

Administrator with Signature Authority
(School and Departmental budgets only) _____ Date _____

Deputy Superintendent
(For districtwide budget requests only) _____ Date _____

Funds are available for this purpose and have been encumbered per Professional Service Firm Request No. _____

Approved: _____

Authorized: Professional Service Firm _____ Date _____

Type of Business (check one)
Sole proprietor or Individual
Partnership
Corporation

Minority or Women Business:
Yes No

If individual, give Social Security No. If corporation give TIN No.

Social Security/TIN No. _____

(Name typed) _____

Address: _____

By: _____
(Signature of Professional Service Firm)