

PAMPA INDEPENDENT SCHOOL DISTRICT
1233 N. Hobart
CONSULTANT SERVICES CONTRACT

CONSULTANT: _____
Name

Title

Address

Social Security No. or I.D. No.

This document when executed by both parties shall serve as a contract between Pampa Independent School District and _____ for consultation services as described below:

WORKSHOP OBJECTIVE: _____

DESCRIPTION OF SERVICES: _____

DATES: To Begin _____ and shall terminate _____

TIME: _____

LOCATION: _____

TERMS AND CONDITIONS:

1. The consultant, firm or agency agrees to provide all services described above and to comply with terms and conditions stated below.
2. Pampa Independent School District agrees to pay a consultant fee of _____ for the services described.
3. The consultant, firm or agency agrees to complete the following forms:
 - Conflict of Interest Questionnaire
 - Criminal Check Authorization Form
 - Felony Conviction Form
 - Verification of Compliance with State Laws
 - W-9
4. Pampa Independent School District will reimburse travel costs associated with providing the services not to exceed school district policies. Pampa ISD will reimburse airfare and lodging costs verified by a receipt. Consultants may not charge nor have charges billed to Pampa ISD. Meals are reimbursed at \$36.00 per day based upon departure and arrival times (reimbursement is not based upon meal receipts). Mileage reimbursement will be based upon the state rate. Pampa ISD is a Texas governmental entity, exempt from Texas State Sales Tax. We do not reimburse Texas sales tax per TEA.
5. Equipment requests must be made prior to the presentation.
7. Please attach a detailed agenda and identify strategies, activities and materials to be utilized.
8. Payment for services and reimbursement of travel expenses will be made within 30 days upon receipt of invoice after completion of service.

BUDGET CODE: _____

APPROVAL

CONSULTANT:

SIGNATURE

TITLE IF APPROPRIATE

DATE

PAMPA INDEPENDENT SCHOOL DISTRICT:

SUPERINTENDENT'S SIGNATURE

DATE