

INDEPENDENT CONTRACTOR FORM

Supplier Name: _____
Mailing Address: _____
Place & Type of Incorporation: _____

By signing below, Supplier acknowledges and agrees that Supplier has proposed to provide the Services outlined in this Independent Contractor Form (the "Agreement") for **THE FLORIDA ATLANTIC UNIVERSITY BOARD OF TRUSTEES** ("FAU"), on behalf of its _____ (*department*). The parties hereto agree as follows, as of the last date signed between the parties (the "Effective Date");

1. Services. *Please describe the services Supplier will be providing and/or performing. Outline any milestones, reports, deliverables, products, etc., that Supplier is to provide, as well as any dates or deadlines. Attach a separate sheet if necessary.*

2. Term. *Supplier shall provide the Services during the following period (the "Term");*

3. Fee. *Supplier will be paid for the Services as follows:*

4. Key Personnel: *Please detail who of Supplier's personnel will be providing the Services. If not relevant, please write N/A:*

5. Other Information. *Please detail any other relevant information. If none, please write N/A:*

This Agreement shall be subject to FAU's Standard Terms and Conditions, located at <https://www.fau.edu/procurement/files/potterms.pdf> (the "Terms") in effect upon the Effective Date. Such Terms are hereby incorporated into and made a part of this Agreement by this reference. By signing below, Supplier warrants represents that Supplier has had the opportunity to review the Terms and agrees to abide by the terms contained therein. The parties represent and warrant that any person signing the Agreement has the authority to do so and that such signature shall be sufficient to bind Supplier. The Agreement may be signed electronically and shall be considered signed if/when a party's signature is delivered by facsimile or e-mail transmission of a ".pdf" format date file, including via DocuSign. Such signature shall be treated in all respects as having the same force and effect as an original.

**THE FLORIDA ATLANTIC
UNIVERSITY BOARD OF TRUSTEES**

SUPPLIER

By: _____
Name: _____
Title: _____
Date: _____

By: _____
Name: _____
Title: _____
Date: _____

SERVICES SHALL NOT BEGIN UNTIL THIS AGREEMENT IS PROPERLY EXECUTED