



FORM 1

CONTRACT FOR FEDERALLY FUNDED CONSULTANT SERVICES

Funding Source: _____ Req.# _____

FUND	FUNCTION	OBJECT	SUB-OBJECT	ORGANIZATION	YEAR	PROGRAM	PROJECT GROUP	PROJECT CODE

Name of Consultant _____

Vendor ID # _____

Address _____

State/ Zip Code _____

Date (or dates) of service _____

Location where services are to be provided (Campus, Dept., etc.) _____

Services to be provided _____

Fees:

1. Fees (All inclusive daily rate fee preferred)

Daily rate fee \$ _____ x number of days _____ = \$ _____

Hourly rate \$ _____ x number of hours _____ x number of days _____ = \$ _____

Other Fees (Specify) _____ = \$ _____

Total cost = \$ _____

Signature of Consultant Date

Supervisor's Approval Date

TERMS AND CONDITIONS

1. This contract is effective upon the District's receipt of the NOGA from the awarding agency.
2. The contract period is aligned to the grant period of availability, as stated on the NOGA (period of availability).
3. All services must be reasonable, necessary, allocable and must be completed during the effective dates of the contract.
4. All services will be invoiced monthly after services are rendered, and paid upon verification of receipt of services.
5. The regulations for procurement in 2 CFR §§200.318-324 are followed in issuing the contract.
6. All professional services provided under the contract will follow the provisions of 2 CFR 200.459 Professional service costs.
7. **Family Educational Rights and Privacy Act (FERPA).** Parental consent must be obtained before personally identifiable information is used for any purpose other than meeting a requirement under the Individuals with Disabilities Education Act or disclosed to anyone other than officials of agencies collecting or using this information. The District may not release information from these records without parental consent except as provided in the Family Educational Rights and Privacy Act (FERPA).