

**Internal Routing Page**

*The following departments have reviewed the Agreement:*

**Lincoln University (Pennsylvania) Associate Vice President/Dean/Department Head**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature Date**

**Lincoln University (Pennsylvania) Purchasing Department**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature Date**



**PERSONAL SERVICE AGREEMENT**

This Personal Services Agreement (“Agreement”) is entered on \_\_\_\_\_\_\_\_\_\_\_ by and between

Lincoln University, with an address of 1570 Baltimore Pike, Lincoln University, PA 19352 and

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, with an address of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby known as the “Vendor”.

**WHEREAS**, the vendor will provide Lincoln University the following services:

1. **SCOPE OF SERVICES.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. **DATE(s) OF SERVICES. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **PAYMENT AND EXPENSES**. Lincoln University agrees to pay $ \_\_\_\_\_\_\_\_\_\_\_ for services rendered. Invoices will be paid within thirty days upon receipt, after the engagement, provided the vendor has complied with all the terms contained herein. For multiple events, invoices will be paid thirty days after each event.
3. **TERM**. The term of this Agreement shall commence on the Effective Date and all Services shall be completed by [[ End Date ]] “Term”).
4. **CONTRACT ADMINISTRATORS.**

Name | Clifton Crawford, Director of Purchasing

Full Address | 1570 Baltimore Pike Lincoln University, PA 19352

Phone | 484-365-5250

Email | ccrawford@lincoln.edu

The Contract Administrator for Vendor is:

Name |

Full Address |

Phone |

Email |

1. **INDEPENDENT CONTRACTOR:** Both parties agree that the vendor is an independent contractor and not an employee of Lincoln University. As an independent Contractor you are responsible for paying all taxes. If this agreement is for amounts above six hundred dollars, Lincoln University will send the vendor a 1099 form.
2. **ADDITIONAL PERSONNEL**. Contractor is wholly responsible for performance of the Services.

Contractor shall secure all personnel required to perform the Services at Contractor’s own expense.

Such personnel will not be employees of or have any contractual relationship with Lincoln. The Contractor warrants that it is the lawful agent for any third parties used to fulfill obligations under this Agreement.

1. **FORCE MAJEURE:** Both Parties is hereby relieved of any liability if unable to meet the responsibilities of this agreement because of war, weather, riots, epidemics, strikes, any act or order by public authority beyond Lincoln University’s control.
2. **INDEMNITY:** The Parties each agree to indemnify and hold harmless the other Party, its agents , directors, trustees, and employees from and against any and all loss, damages, liability, penalties, punitive damages, expenses, including attorney’s fees, and costs of any kind or amount whatsoever, which result from the negligence of or breach of this Agreement by the indemnifying party.
3. **ENTIRE AGREEMENT.** The Parties acknowledge and agree that this Agreement represents the entire agreement between the Parties. In the event that the parties desire to change, add, or otherwise modify any terms, they shall do so in writing to be signed by both parties.
4. **GOVERNING LAW:** This agreements and rights and obligations of the parties hereto shall be interpreted, construed and enforced in accordance with the laws of the State of Pennsylvania.

Do not provide any service until you receive a Purchase Order. All invoices must be emailed to AP@lincoln.edu.

**SIGNATURE PAGE**

The Parties agree to the terms and conditions set forth above as demonstrated by their signatures as follows:

Vendor:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lincoln University Department Head/Director

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_