

**Portland State University**

**Personal/Professional Services Contract Cover Sheet  
(For Services Costing Over \$10,000)**

Form prepared by:	Email:
Phone Number:	Mail Code:
For assistance completing this form, please view the PSC Instructions on our <a href="#">Forms &amp; Documents</a> page or contact Contracting and Procurement Services at <a href="mailto:contract@pdx.edu">contract@pdx.edu</a> or at 503-725-3441	<ul style="list-style-type: none"> <li>• A PSC may not be used to pay a current PSU Employee or a former employee who has worked at PSU during the same calendar year these services shall be delivered.</li> <li>• Check the <a href="#">Employee vs. Independent Contractor Checklist</a> to confirm that the contractor is providing services consistent with that of an independent contractor.</li> <li>• If the contractor does not meet the above requirements you must contact HR about using a wage agreement to pay for these services.</li> </ul>

**PORTLAND STATE UNIVERSITY CONFLICT OF INTEREST CERTIFICATION:**

PSU Employees must avoid all conflicts of interests and shall also strive to avoid even the appearance of impropriety.

No PSU employee shall approve or recommend approval of a contract with an entity (person or company) in which they have a financial interest, or one in which a relative\* has a financial interest. If such a situation arises, the PSU employee shall recuse themselves of any involvement in this contract or the selection of the Contractor.

\*"Relative" includes spouse, children, parents, step-parents, stepchildren, brothers and sisters, half-brothers, half-sisters, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, mothers-in-law, fathers-in-law, aunts, uncles, nieces and nephews.

The persons signing below certify that they have read, understood and complied with the above requirements.

**Department Requester (PSU Employee Requesting Contractor's Services):**

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

**University Department Head:**

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

**WORKING ON PSU CAMPUS:**

In performing services under this Contract, will the Contractor be on the PSU campus for any reason?

Yes  
No

**TOTAL PAYMENTS MADE TO THE CONTRACTOR THIS FISCAL YEAR:**

1. The total dollar amount of any other payments your department has made to the Contractor this fiscal year: \$\_\_\_\_\_.
2. The total dollar amount your department will pay to the Contractor this fiscal year: \$\_\_\_\_\_.

Grant/Research/Sponsored Project Funded: Yes / No (Check one)    PSU Foundation Funded: Yes / No (Check one)  
 Does this contract generate revenue for PSU?: Yes / No (Check one)    Federally Funded: Yes / No (Check one)

**- Solicitation Thresholds:**

- Up to and including \$50,000: **NO SOLICITATION REQUIRED**
  - \$50,001 - \$200,000: Informal Procurement Required - Request for Quote (RFQ) solicitation
  - \$200,001 or more: Formal Procurement Required - Request for Proposal (RFP) solicitation
- \* [Uniform Guidance](#) Solicitation Thresholds apply for Federally Funded Contracts.

If the total dollar amount your department will pay to the contractor this fiscal year is \$50,000 or more you must submit a [Solicitation Request Form](#) to [contract@pdx.edu](mailto:contract@pdx.edu).

Portland State University

Personal/Professional Services Contract  
(For Services Costing Over \$10,000)

Banner Document #: \_\_\_\_\_  
PSC No. \_\_\_\_\_

Vendor ID #: \_\_\_\_\_

This Contract is between **PORTLAND STATE UNIVERSITY** (University), \_\_\_\_\_ (Department)  
and \_\_\_\_\_ (Contractor).

**CONTRACT TERM:** This Contract is effective as of the date of last signature (Start Date). This Contract and any amendments to this Contract will not be effective **until this Contract is executed by Contracting and Procurement Services** of the University and by the appropriate persons as listed below. This Contract will expire on \_\_\_\_\_ (End Date) unless modified by a fully executed amendment.

**COMPENSATION:**

**1. Contractor's Fee/Honorarium (You must check one and add a payment schedule):**

Contractor will receive a fixed fee in the amount of \$ \_\_\_\_\_. The payment schedule is as follows:

Contractor shall be paid a variable fee not to exceed \$ \_\_\_\_\_, which shall be determined as follows:

**2. Expenses (You must check one):**

Contractor's fee/honorarium includes all expenses.

University will reimburse Contractor's travel expenses in an additional amount not to exceed \$ \_\_\_\_\_.

University will directly pay third parties for travel expenses incurred by Contractor in performing services under this Contract in an additional amount not to exceed \$ \_\_\_\_\_.

All expenses, whether reimbursed to Contractor or paid to a third party by the University, are subject to the University's published reimbursement rates, found at: <https://portlandstate.atlassian.net/wiki/spaces/UFS/pages/1992855295/Travel>

**3. Total Dollar Amount:**

The total payments made to the Contractor under this Contract ("maximum compensation amount") shall not exceed \$ \_\_\_\_\_.

**ATTACHMENTS:**

The following checked attachments are incorporated by this reference and made a part of this Contract (check all that apply):

- Attachment A: University's Personal Services Contract Terms and Conditions can be found at:  
<https://www.pdx.edu/purchasing-contracting/PSC-Attachment-A>
- Attachment B - Corporation/Independent Contractor Certification. Must be attached to all PSCs, except NRA PSCs.
- Attachment C: If necessary, attach description of personal or professional services.
- Other:

**INSURANCE:** a minimum of \$1,000,000 per occurrence, \$3,000,000 annual aggregate is required if one or more boxes are checked.

Type required: CGL AUTO Professional Liability

**SCOPE OF WORK; PERSONAL AND/OR PROFESSIONAL SERVICES TO BE PERFORMED:**

The Contractor shall perform the following services:

**PERSONAL SERVICE CONTRACT ACCOUNTING INFORMATION:**

Index/Fund Code	Account Code	Activity Code	Amount

**Grant Approval (If required):**

**I certify that sponsored project funding is available and the proposed costs are accurate, allowable charges for the sponsored project indexes listed. It is within my budgetary authority to approve these charges.**

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

**PSU Foundation Approval (If required):**

**I certify that PSU Foundation funding is available and the proposed costs are accurate, allowable charges for the Foundation indexes listed. It is within my budgetary authority to approve these charges.**

Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Date: \_\_\_\_\_



**Attachment B  
Portland State University  
Personal/Professional Services Contract  
Corporation/Independent Contractor Certificate**

**This form is not required for PSCs with Non Resident Aliens.**

***The Contractor must complete either A or B below:***

**A. CONTRACTOR IS A CORPORATION**

CORPORATION CERTIFICATION: Person named below is authorized to act on behalf of entity designated below, and hereby certifies under penalty of perjury that entity is a corporation.

**Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**OR**

**B. CONTRACTOR IS AN INDEPENDENT CONTRACTOR**

Contractor certifies as follows:

1. I understand that I may be required to file federal and state income tax returns in the name of my business or a business Schedule C as part of the personal income tax return for labor or services performed as an independent contractor.
2. I understand the University will not be responsible for providing me additional compensation if my costs or losses exceed the amount I am paid for services.
3. If providing the services requires licenses or certifications, I have current and valid licenses or certificates required to provide the services.
4. I represent to the public that the labor or services will be performed as an independent contractor as the following circumstances exist. **Please check all that apply:**
  - The labor or services are primarily carried out at a location that is separate from the University (separate locations may include another university).
  - I am free from direction and control by the University over the means and manner of completing the work and providing the services, subject only to the right of the University to specify the desired results.
  - I set my own work hours.
  - I supply the tools, equipment, and skills necessary to perform the services.
  - Labor or services are performed pursuant to written contracts.
  - I have the right to hire employees, at my own expense, to help me perform these services for the University. (I may also choose not to use this right.)
  - I assume financial responsibility for defective workmanship or for service not provided.
  - I perform the same or similar services for multiple clients.
  - I market or advertise the same or similar services that I will perform for the University to obtain new clients or I pursue opportunities to perform similar services for other clients.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_

**ORS 670.600 Independent contractor standards.** As used in various provisions of ORS chapters 316. 656. 657 and 701, an individual or business entity that performs labor or services for remuneration shall be considered to perform the labor or services as an "independent contractor" if the standards of this section are met. State agency certifies the contracted work meets the following standards:

1. The Contractor is free from direction and control over the means and manner of providing the labor or services, subject only to the specifications of the desired results.
2. The Contractor is responsible for obtaining all assumed business registrations or professional occupation licenses required by state law or local ordinances.
3. The Contractor furnishes the tools or equipment necessary for the contracted labor or services.
4. The Contractor has the authority to hire and fire employees to perform the labor or services.
5. Payment to the Contractor is made upon completion of the performance or is made on the basis of a periodic retainer.

**University Department Head Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_