

Limited Engagement Agreement

U.S. Citizens/Resident Aliens



University of Pennsylvania

| |
|---------------|
| Today's Date: |
|---------------|

Service Provider Information

| | |
|--|--------------|
| Name of Individual | |
| Address (street, apt. or suite no., or rural route). | |
| City, State and Zip Code | |
| Email | Phone Number |

Notice: This Agreement is designed for the *limited* engagement of an academic nature and a short duration presented to the University community. It is not designed for engagements that create a material risk of physical injury or property damage. For these high-risk engagements requiring insurance, the Independent Contractor Agreement form should be used.

.....
 This agreement is made by and between the Trustees of the University of Pennsylvania, a Pennsylvania tax exempt educational corporation ("University"), and

("Individual"), and is effective as of this day of _____, _____.

The parties agree as follows:

1. **ENGAGEMENT:** **Individual** will provide a speech, lecture or performance on the _____ day of _____, _____.

2. **DESCRIPTION OF SERVICES:**

3. **LOCATION OF SERVICES:**

4. **PAYMENT/TAXES:** University will pay Individual the sum of \$..... (exclusive of expenses) in U.S. dollars based upon applicable payment terms. University will not withhold or pay U.S. federal, state, or local income or other payroll taxes on behalf of individual. Individual agrees to report and pay taxes and applicable licensing fee(s) and adhere to reporting requirements. All travel expenses must be included on the invoice. The University will issue an IRS 1099 MISC for all payments of \$600 or more within a calendar year.

5. **SERVICE PROVIDER:** **Individual** will be participating in the Engagement as a service provider and not as an employee or agent of University.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be duly executed by their respective authorized representatives as of the date first set forth above.

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Signatures

The Trustees of University of Pennsylvania

| | |
|------------|-------|
| Print Name | Title |
| Date | |

Service Provider

| | |
|------------|-----------|
| Print Name | |
| Date | Signature |