

Professional Services Agreement

Agricultural Development Council
The University of Arkansas Foundation, Inc.

Contractor Name: _____
Contractor's a U of AR
System Employee?: _____
Social Security Number: _____

Permanent Address: _____ Current Address: _____
(if different from permanent address)

Objectives and Time Frame:

Compensation: _____ **ADC Project ID** _____
[Include both unit rate (i.e., rates per hour, per day, etc.) and gross total the ADC will be assessed for Agreement.]

The Agricultural Development Council shall exercise no managerial responsibilities over the contractor or contractor's employees. It is expressly agreed that there is no employment relationship between the contracting parties.

Contractor

Principal Investigator

Section Leader/Department Head/Unit Head

Milo J. Shult
Vice President for Agriculture