Independent Contractor Agreement (ICA)

How To Hire a Consultant



What is an ICA

•A legal document to engage consultants when there are no qualified college employees available to provide the services needed.

Requirements to Engage a Consultant

- Department must have a clear and concise Scope of Work (SOW)
- If under \$5,000, department may suggest vendor, subject to Purchasing approval
- If over \$5,000, a solicitation must be done by the Purchasing Office. Department may also suggest consultant during this process.
- All CUNY/NYS/NYC rules apply

How Do I Start the ICA Process?

Before you begin the process of ascertaining consultant services, contact Purchasing at x5525 or send an email detailing what services you are looking for.

 Purchasing will send you the latest version of the document to avoid processing delays.

If under \$5,000, the end-user department can fill out the ICA document and submit to Purchasing for review/approval (Before sending to Vendor/Consultant for signature)

How to Become a CUNY Vendor

Vendor must register with NYC FMS:

https://a127-pip.nyc.gov/webapp/PRDPCW/SelfService

- Must complete and submit the CUNY Vendor Payee
 Registration form after receiving FMS vendor number.
- It is the sole responsibility of the consultant to execute/complete the registration process.
- THE COLLEGE CANNOT DO BUSINESS WITH A VENDOR THAT IS NOT ACTIVATED IN NYC AND CUNY.

How Do I Fill Out the ICA Document?

•End-user department must fill out the document, Page 1, Claim for Payment (Exhibit 1), SOW, and Payment Terms (Exhibit 3).



ICA Document – Page 1

between The City University of Ne	w York on behalf of LaGua	rdia Community College
("University"), located at	31-10 Thomson Avenue	, Long Island City , New
York 11101 , and	Walt Disney Enterprises	("Contractor"), located at
123 Neverland Street	t , Neverland	, FL , 12345 .
attached (the "Services"), and Cor provide all necessary staff support	ontractor to provide the services set for fitactor agrees to perform the Services and administrative services connected t ag New York State Appendix A. June 30, 2017	as directed by the University and to herewith in accordance with the terms
in consideration: \$ 2500 , to to be paid, Contractor shall complete	rformance of the Services, Contractor sho be paid according to the Payment Term ete, sign, and submit the Independent C ter with each invoice, to the address set	s in Exhibit 3 attached hereto. In order contractor Service Claim for Payment
	submit New York State-required forms	
	the University. See paragraph 15 of Te	
IN WITNESS WHEREOF, the	e parties hereto, by their duly authorize	ed representatives, have executed this
Agreement as of the day and year fir	rst written above.	•
		EDSITY OF NEW YORK
CONTRACTOR		ERSITY OF NEW YORK
CONTRACTOR	THE CITY UNIV	ERSITY OF NEW YORK
CONTRACTOR EIN (leave blank if SSN): By:	THE CITY UNIV	ERSITY OF NEW YORK
CONTRACTOR EIN (leave blank if SSN): By: (signature)	THE CITY UNIV. on behalf of By: (signature)	ERSITY OF NEW YORK
CONTRACTOR EIN (leave blank if SSN): By:	THE CITY UNIV on behalf of By: (signature)	ERSITY OF NEW YORK
CONTRACTOR EIN (leave blank if SSN): By: (signature) Name:	THE CITY UNIV. on behalf of By: (signature) Name: (print Title:	name of authorized representative)
CONTRACTOR EIN (leave blank if SSN): By: (signature) Name: (print_name_of_authorized_re	THE CITY UNIV. on behalf of By: (signature) Name: (print Title:	
CONTRACTOR EIN (leave blank if SSN): By: (signature) Name: (print name of authorized reconstruction)	THE CITY UNIV. on behalf of By: (signature) Name: (print Title:	name of authorized representative)
CONTRACTOR EIN (leave blank if SSN): By: (signature) Name: (print name of authorized representations) Title: (print title of authorized representations)	THE CITY UNIV. on behalf of By: (signature) Name: (print Title: (print title)	name of authorized representative) e and College of authorized representative)
CONTRACTOR EIN (leave blank if SSN): By: (signature) Name: (print name of authorized representation of	THE CITY UNIV. on behalf of By: (signature) Name: (print Title: (print title) aubmitted to the Purchasing Department disignature	name of authorized representative) e and College of authorized representative) by:
CONTRACTOR EIN (leave blank if SSN): By: (signature) Name: (print name of authorized representation	THE CITY UNIV. on behalf of By: (signature) Name: (print title: (print	name of authorized representative) e and College of authorized representative) by:
Name: (print_name of authorized representation) Title: (print_title of authorized representation) This Agreement was prepared and s End User Name and print name and title of preparer	THE CITY UNIV. on behalf of By: (signature) Name: (print Title: (print title) aubmitted to the Purchasing Department disignature	name of authorized representative) e and College of authorized representative) by:
CONTRACTOR EIN (leave blank if SSN): By: (signature) Name: (print name of authorized representation	THE CITY UNIV. on behalf of By: (signature) Name: (print title: essentative) submitted to the Purchasing Department disignature signature vidual in the Purchasing Department dispractive.	name of authorized representative) e and College of authorized representative) by:

Certificate of Acknowledgement – Page 2 (For Consultant to Get Notarized)

COL)	
	JNTY OF) ss:	
On	the	day		in the year 201, before me, the undersigne personally known to me or proved to me on the basis of satisfactory evidence
in he	r/his capacit	y, and th	at by her/his sign	d to the within instrument and acknowledged to me that s/he executed the san nature on the instrument, the individual, or the person upon behalf of which t ; and further that.
Ma	rk an X in th	e approp	riate box and co	emplete the accompanying statement.]
	(If an individ	lual): _h	e executed the fo	oregoing instrument in his/her name and on his/her own behalf.
		tion): _h	e is the	
1	behalf of the	corpora	ation for purpos	the corporation described in said instrument; that, f said corporation, he is authorized to execute the foregoing instrument es set forth therein; and that, pursuant to that authority, he executed the and on behalf of said corporation as the act and deed of said corporation.
	of	aid parti	nership, he is au	the partnership described in said instrument; that, uthorized to execute the foregoing instrument on behalf of the partnership fursuant to that authority, he executed the foregoing instrument in the name he act and deed of said partnership.
1	purposes set:		partnership as the	
1 1 3	purposes set : and on behal (If a limited !	f of said iability o	company): _he is	s a duly authorized member of
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(((((purposes set and on behal (If a limited l LLC, the liminstrument of authority, _he	f of said liability o lited liab n behalf e execute	company): _he is sility company d of the limited led the foregoing	s a duly authorized member of lescribed in said instrument; that _he is authorized to execute the foregoi liability company for purposes set forth therein; and that, pursuant to the instrument in the name of and on behalf of said limited liability company as to
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1	purposes set: and on behal	f of said		

Exhibit 1 – Page 13

- End-user may fill out sections I & II for the Consultant.
- Consultant must submit this form each time they submit an invoice.
- Section V and V1 must be signed by consultant <u>and</u> end-user prior to submitting for payment.

Exhibit 3

Scope of Work – To Be Inserted

Payment Terms/Address for Invoices* – Pg. 15

*31-10 Thomson Ave., E-413, Accounts Payable ap@lagcc.cuny.edu

What is a Scope of Work?

- The Scope of Work (SOW) describes the work to be performed. The SOW should contain any milestones, reports, deliverables, and end products that are expected to be provided by the consultant. The SOW should also contain a time line for all deliverables.
- NOTE: The SOW should be in the department's own verbiage.
 Not the prospective consultant/vendor's language.

What do YOU want the consultant/vendor to do?

How Do I Create a SOW?



1. Introduction

Introduce the SOW and then provide an outline of the objectives and accomplishments to be achieved with this project. Provide a brief background of any information that is important to understand in order to accomplish the project goals. What is needed to know in order to make understanding of project more complete? Overview of need and desired outcomes.

2.SOW

Provide a general description of the project. What do you hope to accomplish? What are your overall goals and objectives (provide a bulleted tiered listing. Estimated timeline to complete each objective (if applicable). Clarify where, how and under what circumstances project is applicable, relevant and significant.

3. Required Attachments

- Resume
- License/Certifications
- Business References (at least 3)

Purchasing Staff Information

Purchasing Office

Location: E405

Phone / Fax:

718.482.5525/718.609.2166

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Purchasing@lagcc.cuny.edu

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