

TTU SCHOOL OF MUSIC
PROFESSIONAL SERVICE AGREEMENT/CONTRACT
REQUEST FORM

Director must approve requests no less than two weeks prior to event. **Requesting faculty member may be responsible for payment to contractor if approval deadline is not met.**

Requestor (*faculty member*) Name _____ Date _____

Name of Event (if applicable) _____
(Example: faculty recital, guest artist, masterclass, competition, etc.)

Describe Contractor Service _____
(Example: recital accompaniment, guest artist performance, adjudicating competition, masterclass, commissions, etc.)

Amount of Payment to Contractor \$ _____

Dates of Service (rehearsals, etc.) _____

Final Performance Date _____

Name of Contractor _____

Contractor Address _____

(Home phone #)

(Cell phone)

E-mail address (***required***) _____

Is contractor employed by another Tennessee State College or University? Yes _____ No _____

If "Yes" list name of College or University (dual service agreement is required)

*Standard pay for Accompaniment is \$300.00 (includes rehearsals)

*All payments for services will be mailed to contractor.

Circle the account the contract is to be paid from:

- **Music Department Funds**
- **Fine Arts Foundation**
- **Other**

Approved _____ Date _____

(*Director*)

Revised 8/27/19