*To be completed electronically by the Principal Investigator (PI)*

All fields are expandable

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| --- | --- | --- |
| * Name of proposed individual or organisation providing services: | | |
| * Full permanent home address of the individual or registered office address of the organisation: | | |
| * Are services to be provided through a limited company: Select from dropdown list * If ‘Yes’ provide Company Number: | | |
| * PI name: | | |
| * Invoices to be paid from:   + Project or general ledger cost centre title:   + Project or general ledger cost centre code: | | |
| * Planned contract start date: * Planned contract end date: | | |
| * Summary of the work to be undertaken by the individual/organisation*.*   *This will form part of a Schedule to the Consultancy Agreement and so it needs to specify the actual work to be undertaken by the Consultant (not just a general description of the research project) and should be sufficiently detailed to inform the Consultant of the PI’s expectations and to enable an independent adjudicator to assess whether the work has been undertaken as described.* | | |
| Please answer all the following questions:  If an individual/organisation sent a **suitably qualified and experienced** substitute in their place to complete the work, would you accept them? Select from dropdown list   * + If ‘No’ supply brief details to explain why a substitute would not be accepted:      * Who decides the working hours of the individual/organisation? Select from dropdown list * Where will the work be carried out? * Are you aware of the University having engaged the services of the individual/organisation before? Please add details: * Will the individual require a University card and/or access to Departmental drives? YES/NO Please add details of what is required and purpose:   *FOR FINANCE STAFF ONLY: If the answer to this question is ‘Yes’ please update the ‘Visitors and Consultants’ spreadsheet in the Visitors, Secondments and Consultants channel (Staff Contracts Review team). Speak to Emma Brant or Felicity Peachell if you are unable to access this channel.*   * **GDPR** – will the Consultant be Processing Personal Data on behalf of the University? YES/NO   If Yes, please complete the following Data Protection Particulars Table:   |  |  | | --- | --- | | **The subject matter and duration of the Processing** |  | | **The nature and purpose of the processing** |  | | **The type of Personal Data being Processed** |  | | **The categories of Data Subjects** |  | | | |
| * **Payment details**     A fixed amount of [insert currency and amount]  or  A daily rate of [insert currency and amount] per day up to a maximum of [insert] days  Should the Fee be expressed to be inclusive or exclusive of VAT?   * Will the consultant be reimbursed for reasonable expenses incurred during the course of this work? YES/NO   + If the answer is YES please provide details of expenses that can be reimbursed (e.g., travel, equipment, accommodation) and any applicable limits. * If the total value of the services exceeds £2,500 have alternative quotes been sought?   Select from dropdown list  If the value exceeds £2,500, but is less than £5,000, and additional quotes are not available please confirm reasons for this:   * Where the total value of the quote exceeds £5,000 a single quote justification form or tender exemption form (for purchases in excess of £25,000) is required. Finance will provide a template on request. | | |
| * Deliverables *(please enter as much detail as possible)* | Date due by | Amount |
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* Use this space to supply additional details if required.

PI signature:

Date:

*Please submit this form to* [*finance@phc.ox.ac.uk*](mailto:finance@phc.ox.ac.uk) *along with copies of quotes or other relevant information.*