

**SOUTHWEST FLORIDA PUBLIC SERVICE ACADEMY**

4312 Michigan Avenue, Fort Myers, FL 33905

Phone: (239) 334-3897

Main Office Fax: (239) 334-8794

Date: \_\_\_\_\_

**CONSULTANT CONTRACT PROPOSAL**

Title of Course Requested: \_\_\_\_\_

Cost of Course: \_\_\_\_\_

(Travel expenses/arrangements are the sole responsibility of the consultant)

Total Hours of Course Requested: \_\_\_\_\_

Time of day Course to be taught: \_\_\_\_\_

Location of where Course is to be taught: \_\_\_\_\_

Description of Course: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of course to be taught:

1<sup>st</sup> Choice: \_\_\_\_\_

2<sup>nd</sup> Choice: \_\_\_\_\_

Name of Agency making request: \_\_\_\_\_

Person from Agency making request: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Number of Officers from my department who will attend the course: \_\_\_\_\_

Maximum number of students the Consultant will teach: \_\_\_\_\_

\_\_\_\_\_

\*Consultant or Vendor Name: \_\_\_\_\_

\*Social Security Number: \_\_\_\_\_

\*Company: \_\_\_\_\_

\*FEID: \_\_\_\_\_

\_\_\_\_\_

Does Vendor have F.D.L.E. Teaching Credentials: YES \_\_\_\_\_ NO \_\_\_\_\_

\*Teacher's Name & Social Security Number: \_\_\_\_\_ SS#: \_\_\_\_\_

\*Address of Consultant/Vendor: \_\_\_\_\_

\*Phone Number: \_\_\_\_\_

\*Fax Number: \_\_\_\_\_ \*E-Mail Address: \_\_\_\_\_

\*Address where Consultant fee is to be mailed (if different from above): \_\_\_\_\_

\_\_\_\_\_

\*Name of Consultant/Vendor Representative authorized to sign contract: \_\_\_\_\_

\_\_\_\_\_

**\*THIS FORM WILL NOT BE PROCESSED WITHOUT THE ABOVE INFORMATION**

Please provide the vendor/consultant with the below listed information.

\*Vendor /Consultant we have the right to cancel course one - two weeks prior to class starting. Any course with low registration numbers will be given until the week prior to start before cancellation.

\*Payment to the vendor/consultant will be rendered 2-3 weeks after the course is completed with a complete file.

\*NOTE: We require 2 months notice for any printing that needs to be done

**RETURN FORM TO TODD EVERLY -DIRECTOR**