



Bevill State Community College Vendor Service Agreement

This vendor agreement is made this _____ day of _____ between Bevill State Community College, the Institution, and _____, the Vendor, and conditional upon acceptance thereof by the Institution, will confirm the Vendor appointment for the performance of the following services: _____. The compensation for the agreement period will be _____ payable in _____ equal payment(s) of \$_____ each. The period of the agreement will begin _____ and will end _____.

Duties and responsibilities for the Vendor are subject to the policies, procedures, and regulations now existing or which hereafter may be changed as promulgated by the Institution and the laws, policies, procedures, and regulations now existing or which hereafter may be changed to govern the Institution.

This agreement is subject to the "Terms and Conditions" listed hereon or which are attached hereto and made a part hereof. The Vendor agrees to be responsible for all state, federal, and local taxes applicable to this contract. Acceptance of this agreement and the provisions of this agreement should be indicated by signing in the space provided.

This agreement must be signed by the appropriate **Administrators** before any services are performed. This agreement is not valid unless approved by the appropriate College-wide Dean and the Vice President of Administration & Operations (unless reimbursable by non-government entity). The original document with all required signatures should be forwarded to the Central Business Office within five days of receipt hereof.

Vendor Name/Date

Appropriate College-wide Dean/Date

Reimbursable: Yes No

Vice President of Administration & Operations/Date

I acknowledge that I have read and understand all provisions of the foregoing contract vendor service agreement including its "Terms and Conditions" and I accept this agreement and agree to abide by all provisions of the foregoing agreement. Acceptance of this agreement and its provisions should be indicated by signing below.

Vendor Name

Vendor Signature

Address

Social Security Number/EIN

City, State, Zip Code

It is the policy of the Alabama Community College System, its Board of Trustees, and Bevill State Community College, a postsecondary institution under its control, that no person shall be discriminated against on the basis of any impermissible criterion or characteristic, including, but not limited to, race, color, national origin, religion, marital status, disability, gender, age, or any other protected class as defined by federal and state law.

This agreement will be paid through the Central Business Office from account number: _____.

Date Sent to Business Office: _____

Business Office Received: _____

AP Use Only: Original: AP Copies: Central Bus. Off. VP CW Dean Requester Vendor