



Arts in Education Residency Program

Directory Artist Residency Invoice

Artist Name/Company Name: _____

Address: _____

Social Security #/Federal ID Number (For IRS #1099 purposes): _____

Residency Site: _____ Host/Teacher: _____

1. Description of Services:

2. Dates of Residency:

3. Stipulations of Services:

- A. An artist(s) must be an organization or an individual who is an independent consultant with respect to these services. These artists are not employees of the Northern Tier Partnership for Arts in Education and are therefore not entitled to the benefits or protections of employees. Payment of the amount(s) provided herein shall be the sole monetary obligation of the Northern Tier Partnership for Arts in Education and the responsibility of payment of all federal and state income taxes associated with this agreement, and any other charges imposed by law upon individuals or other legal entities shall be the sole responsibility of the artist.
- B. The artist should understand that all honoraria will be paid after services have been provided and, if applicable, after submission of the completed summary form for the PA Council on the Arts. If reimbursement for specified expenses is a negotiated part of the contract, it will be at the convenience of the Northern Tier Partnership for Arts in Education after complete documentation for expenses incurred are received. Original receipts must be obtained for all such costs.
- C. In the event of inclement weather, which prevents the performance of the contracted service(s), the artist will work with the AIE program to renegotiate another date/time. Payment can only be made for work that has been completed, not for work that is promised/scheduled.

4. Total to be paid \$_____ (Equals total artist fees)

****Budget Must Match Original Application**

_____ # of days x \$_____ per day. = \$_____ Total

5. Signatures of Agreement:

Artist/Date

AIE Director/Date