Statement of Work

Prepared for: [Client.Company]

Created by: [Sender.FirstName][Sender.LastName][Sender.Company]

Statement of Work No. [Document.RefNumber]

THIS STATEMENT OF WORK (“SOW”) is entered into by and between [Client.Company] and [Sender.Company] (“Service Provider”) pursuant to the parties’ [MasterAgreement] dated [Document.CreatedDate].

Description of Services and/or Deliverables

Service Provider will provide [LaborCategoryOrTypeOfWork] resources for [HighLevelDescriptionOfServices] in support of the [ProjectOrGroupBeingSupported] . The period of performance is outlined in the Term/Schedule section below.

Term/Schedule

One [LaborCategoryOrTypeOfWork] resource will perform work as outlined below:

| **Functional Role** | **Est. Start Date** | **Est. Period of Performance** |
| --- | --- | --- |
| [LaborCategoryOrTypeOfWork] | [StartDate] | [NumberOfWeeks] |
|  |  |  |

[Client.FirstName][Client.LastName] may extend the period of performance upon two weeks advance notification in writing. In the case of an extension request to the period of performance, Service Provider may have to substitute the engagement of assigned personnel with another candidate with similar qualifications if the assigned personnel is unavailable. In such an event, [Client.FirstName][Client.LastName] will have the ability to interview the candidate prior to placement.

Deliverables

The Designer will be available to perform design services, such as:

* Develop Design Plans that will direct the overall content and approach for the project
* Provide design input to the [Client.FirstName][Client.LastName] project manager to help develop efficient work processes and schedules
* Work with the business owners and subject matter experts to develop content for training programs
* Develop design prototypes and templates which can be implemented by other designers
* Review materials developed by other designers to ensure consistent standards and approaches
* Participate in design planning and review meetings
* Develop reusable design strategies and templates that can be applied to programs across the organization
* Provide input for post-training tracking and evaluation

Assumptions

* The [Client.FirstName][Client.LastName] primary contact will work with the Service Provider [Sender.ProjectManager] to identify priorities, assign tasks and develop work estimates to ensure that the hours are applied appropriately.
* Service Provider will invoice for actual hours expended per month.
* Additional staff will be contracted separately on a project-by-project basis.
* All materials developed under this SOW are the property of [Client.FirstName][Client.LastName].
* Travel cost (if any) will be billed to [Client.FirstName][Client.LastName] at cost. Other Direct Costs (ODCs) will be invoiced at cost plus administrative burden.
* Service Provider [StaffOrLaborCategory] will be available to work a minimum of 40 hours per week.

Price and Payment Schedule

The total Time and Materials (T&M) maximum amount or “not to exceed” (NTE) amount is [Amount] plus pre-approved travel expenses and ODCs. The below table lists the labor categories, rates, and estimates used to calculate the T&M costs for the effort.

| **Name** | **Price** | **QTY** | **Subtotal** |
| --- | --- | --- | --- |
|  | $0.00 | 1 | $0.00 |
|  | $0.00 | 1 | $0.00 |
|  | $0.00 | 1 | $0.00 |
|  | $0.00 | 1 | $0.00 |

|  |  |
| --- | --- |
| Subtotal | $0.00 |
| **Total** | **$0.00** |

All travel, lodging, and entertainment expenses must be pre-approved by [Client.FirstName][Client.LastName] in writing, and will be in addition to the above-stated NTE amount. At its option, [Client.FirstName][Client.LastName] will book all travel and related expenses. Service Provider’s rates and prices do not include sales tax, and if such tax is applicable, it will be invoiced as a separate line item.

Invoice Schedule

Service Provider will invoice [Client.FirstName][Client.LastName] on a monthly basis for actual hours expended.

In addition to the above, ODCs and pre-approved travel expenses will be billed as incurred. Invoices shall be mailed to the following address:

[Client.FirstName][Client.LastName]

[Client.Address]  
[Client.CityStateZIP]  
Attention: [Client.PokeName]

Agreed and Accepted:

[Sender.Company]

Signature

MM / DD / YYYY

[Sender.FirstName][Sender.LastName]

[Client.Company]

Signature

MM / DD / YYYY

[Client.FirstName][Client.LastName]