



Consultancy Acceptance Document

Please read and sign this form where Indicated, and return to Isis Innovation Ltd, Ewert House.

Part A Project Details

Project number		Project Title	
Name of Client			
Project Type	Consultancy <input type="checkbox"/>	Service <input type="checkbox"/>	Service with Consultancy <input type="checkbox"/>
Project Scope			
Deliverables & Dates			

Part B Consultant Details

Name of Consultant			
Maximum hours required in a calendar year)		Consulting fee (gross)	
Travel requirements			

Part C Laboratory Services (to be completed by departmental administrator)

Service Manager			
Equipment / Property / Resources Provided by the University of Oxford		Maximum days required (in a calendar year)	-
Gross Fees		Departmental Cost Centre	-

Declaration - In return for OUC arranging this consultancy I make the following statements to OUC - I undertake that the information I have provided in form OA1 is complete and accurate and I agree to carry out the Project in accordance with all the terms in the relevant Consultancy Agreement whether or not I am a party to the contract. I agree that I will complete any documentation necessary to give effect to the terms of the contract. I agree that the terms set out in DEC/1 apply to my relationship with OUC. I am entitled to carry out this Project and, except as stated in form OA1, this Project requires no University resource. My performance on this Project does not conflict with my University duties and I have no other conflict of interest to declare.

Consultant Signature	Date
Departmental Administrator (if applicable)	Date
Signed by Oxford University Consulting	Date