

Dentist – Agreement for locum tenens/Direct Hire

TERMS AND CONDITIONS

This is an agreement between _____ DDS, a Florida licensed dentist, and The Pate Group, DBA of Southern Crescent Personnel, a Georgia Corporation.

By signing this agreement YOU ARE AGREEING to abide by the terms and conditions set forth.

- To inform The Pate Group if you are offered a full time position as an Associate or if you decide to purchase a referred client's practice. If you form a business alliance with a client and the client hires you on a full time/part-time basis, or you become an Associate, or purchase the practice, then the client could be responsible for the full fee due in the amount of \$25,000.00. This fee is due and payable on or before the start date.
- To maintain and stay in good standing with the Florida Board of Dentistry by following all laws and regulations set forth under the strict state guidelines to maintain your license. You agree to notify The Pate Group of any changes.
- To maintain your malpractice policy and notify The Pate Group immediately if cancelled.
NOTE: The Pate Group does not maintain any malpractice insurance for contracted professionals. You could be held responsible for any damages or physical loss or damage to machinery, equipment or materials. The Pate Group shall not be held liable to any loss or damages to said property caused by contracted Dentist. The Pate Group and its staff or agents are not responsible for claims involving bodily injury, property damage, fire, theft or liability damages. Dentist agrees to add The Pate Group as insured to malpractice policy.
- To follow all OSHA & HIPAA guidelines and adhere to all workplace legal requirements. To put the safety and health of yourself, the patients and staff as the foremost priority.
- You agree that you are not an employee of The Pate Group but instead are a contracted professional. It is your responsibility to turn in to The Pate Group an invoice for number of hours worked. You also agree that you will not form an alliance or agree to commission or separate compensation other than what it is agreed through The Pate Group. You agree that and also understand that to be paid, The Pate Group must receive an invoice. You may fax, mail or scan in and e-mail the invoice may be hand delivered to The Pate Group. You will accept no payment from any of The Pate Group's clients but can and will expect payment for hours contracted.
- You are responsible to pay all your unemployment taxes, Social Security, Federal and State income taxes. The Pate Group will not be responsible for any taxes for contracted professionals.
- You are not under the supervision of The Pate Group or its agents or representatives.
- You agree not to start procedures, such as crown or bridgework that cannot be completed.
- You agree that you will not receive any payments in the form of money or extra compensation paid in the form of commission, while working for a client of The Pate Group or sign a separate agreement for commission without a signed written agreement by The Pate Group. If a commission structure is desired, then there will need to be a written agreement between The Pate Group, the client, and contractor that clearly defines the work to be done and payment to be made. This agreement is to be between The Pate Group, the client, and you the contractor. All payments for services rendered will come through The Pate Group.
- You agree that failure to fulfill your agreed upon commitment could result in a reduced hourly rate.
- You are required to notify The Pate Group of any offer or discussion regarding potential employment within 12 months of any interview or contracted work arranged through The Pate Group.
- You agree as a result of your agreement and working relationship with The Pate Group that you will have access to confidential material and information that belongs to the Client and/or The Pate Group. You agree to protect the confidentiality of the Client, its patients and employees of said client and The Pate Group.

Initial _____

- You agree not to fraternize with individuals employed by Client, Practice, Clinic, Companies or develop personal relationships and/or sexual relationships with employees or patients of Clients.
- You agree not to solicit The Pate Group Client Company's patients and/or employees to work for your personal gain, an affiliate, subsidiary, other connected through another staffing agency, another dental office, practice, or clinic for twelve (12) months following an assignment.

Print Name

Signature

Date

The Pate Group Representative

Date

Copy of
Driver's
License _____

Copy of
Soc. Security # _____

Copy of
Dentist
License _____
Verified _____
DATE

Copy of
Malpractice
Insurance _____
Verified _____
DATE

Resume _____

W-9 _____

Copy of
CPR _____

References verified by: _____
DATE

The Pate Group REPRESENTATIVE

NOTES:

COMMENTS

This is an on-going agreement unless either party submits in writing to terminate said agreement.