

**STATISTICAL CONSULTING UNIT**

**DEPARTMENT OF STATISTICS**

**CALIFORNIA STATE UNIVERSITY, HAYWARD**

**Off Campus Consulting:**

Client Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Department: \_\_\_\_\_ Title: \_\_\_\_\_

Department Account: \_\_\_\_\_

Major Professor: \_\_\_\_\_

Consultant Name(s): \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Project Title: \_\_\_\_\_

**Nature of Consultation:**

**1. Statistical Consulting:**

Appointment time: \_\_\_\_\_

Task description: a. Advice: \_\_\_\_\_ b. Modeling (Chargeable): \_\_\_\_\_

c. Computations(Chargeable): \_\_\_\_\_

Time with client: \_\_\_\_\_

Expected time on follow-up work: \_\_\_\_\_

Fee (dollars per hour, plus 25% University surcharge): \_\_\_\_\_

**2. Programming:**

Estimated Time: \_\_\_\_\_

Task Description: \_\_\_\_\_

Statistical Package: \_\_\_\_\_

Time with client: \_\_\_\_\_

Expected time on follow-up work: \_\_\_\_\_

Fee (dollars per hour, plus 20% University surcharge): \_\_\_\_\_

**Abstract of Problem:** (attach details)

**Recommendations:**