

Provider: Please complete this form along with a W9 if Self-Employed, Partnership, or Professional Corporation to determine whether or not the District can consider contracting with the Provider as an Independent Contractor or if the Provider should be hired as casual labor. Contact Purchasing at, Email: [purchasing@beaverton.k12.or.us](mailto:purchasing@beaverton.k12.or.us), Fax: 503 (356)-4536.

BUSINESS NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_

SCHOOL OR DEPARTMENT PROVIDER IS WORKING WITH: \_\_\_\_\_

INDICATORS OF INDEPENDENT CONTRACTOR STATUS	YES	NO
<b>1.</b> Is the Provider employed by another PERS employer OR has been an employee of Beaverton School District within the last 18 months (i.e. paid any money by our payroll department)?	Go to # 2	Go to # 3
<b>2.</b> Is the Provider doing the same work for this project that the Provider did when employed by Beaverton School District?	Go to # 4	Go to # 3
<b>3.</b> Does the Provider meet the legal definition of an Independent Contractor (ORS 670.600) as evidenced by the ability to certify to a majority of the statements below? <b>Read the statements below:</b> Check Yes or No as each applies to the Provider. There is no established point as to what answers constitutes an Independent Contractor or Casual Labor - the District will make the final decision.	Go to # 5	Go to # 4
<b>3a. Provider, in the provision of the services:</b>		
Is free from direction and control over the means and manner of providing the services?	<input type="checkbox"/>	<input type="checkbox"/>
Is customarily engaged in an independently established business?	<input type="checkbox"/>	<input type="checkbox"/>
Pays his/her own business travel expenses?	<input type="checkbox"/>	<input type="checkbox"/>
Is licensed under ORS Chapter 671 (Architects; Landscape Professions) or 701 (Construction Contractors) as required, and/or is responsible for obtaining other licenses or certificates?	<input type="checkbox"/>	<input type="checkbox"/>
<b>3b. Provider, in the independence of the service work shall:</b>		
Maintain a separate business location from the District (a home office is acceptable)?	<input type="checkbox"/>	<input type="checkbox"/>
Determine how the desired results will be achieved?	<input type="checkbox"/>	<input type="checkbox"/>
Retain significant control over the means and methods of performing work, including hiring and firing its employees?	<input type="checkbox"/>	<input type="checkbox"/>
Bear the risk of business loss in providing the services, as shown by factors such as: a) enters into fixed-price contract; b) required to correct defective work; c) provides warranty and/or insurances such as indemnification, liability, performance bonds, or errors and omissions insurance?	<input type="checkbox"/>	<input type="checkbox"/>
Provide services or do similar work for other agencies with a 12 month period, or routinely engages in business advertising, solicitation or other marketing efforts reasonably calculated to obtain new contracts to provide similar services?	<input type="checkbox"/>	<input type="checkbox"/>
<b>3c. Provider has a substantial investment in his/her chosen trade or business such as:</b>		
Furnish her/her own tools?	<input type="checkbox"/>	<input type="checkbox"/>
Independently maintain business registrations, professional or occupational licenses (or both)?	<input type="checkbox"/>	<input type="checkbox"/>
File Federal and State income tax returns in the name of his/her business?	<input type="checkbox"/>	<input type="checkbox"/>
<b>4.</b> The Provider must be hired as Casual Labor. Provider must contact School or Department work will be performed for.		
<b>5.</b> The Provider may be hired as an Independent Contractor. Email or Fax this form with a W9 to Purchasing (see above).		