

QUINCY SCHOOL DISTRICT # 144 119 J STREET SW QUINCY, WA, 98848

Contract for Personal Services

| Today's Date: Requestor: Group spon | soring event: | |
|---|--|-------------------------------|
| All vendors must be currently active with a W9/UBI nur (a) x3101 at the district office for vendor information. If | | |
| Are you an employee of the Quincy School District? \Box | YES □ NO | |
| s this vendor currently active in the system? YES | Vendor # | |
| Vendor Name: Phone #: Cell Phone #: | | |
| This contract shall commence on (date), and shall terminate In consideration of the promises and conditions contained herein, 1. Consultant responsibilities: • Consultant shall perform the following duties to the Date(s): Time(s): Description of duties: School Location: School Address: School Phone #: School Phone #: School employee contact # the day/night of ever • Consultant will submit request for payment on busing rendered not to exceed the amount stated in the district • Lodging, mileage, materials, etc. are to be included • Consultant must provide either Proof of Insurance in Agreement prior to signing this contract. Please attary POI/Additional Insured provided of | the at midnight on (date). the district and the consultant do mutually a satisfaction of the building principal on: ent: ness invoice for the amount of the payment(s rict responsibilities. in the total cost noted above. naming QSD as an additional insured or a Ho ach one of the following to the back of this d |) for services ld Harmless |
| 2. District responsibilities: In consideration of the consultant's satisfactory performed School District shall compensate the consultant as form total payment for services shall be: \$\frac{\\$S\}{\}\$ Payment shall be distributed for work performed. All payments are made on the last working day of the District Office prior to the 10th of the month. | ollows: ed in payment(s) in the amount of <u>\$</u> the month if appropriate paperwork is submitt | ed to the |
| The approvals below must be obtained prior In Witness whereof, the Quincy School District #144 and const | | ite. |
| | untant have executed this contract: | |
| Requestor's Signature | Date | |
| Supervisor's Signature (if applicable) | Date | |
| ASB Advisor Signature (for ASB only) | Date | |
| Building Principal Signature | Date | |
| Consultant Signature | Date | |
| Forward Personal Services Contract and POI or Hold Harmless Agreement to the District Office for approval. | | |
| Superintendent's Signature | Date | |
| Administrative Assistant Signature | Date Purchase Ordo | er # |

Applicable Law

Consultant shall perform all duties pursuant to this contract as an independent contractor. Quincy School District shall not withhold or pay any taxes on behalf of Consultant.

This contract may be terminated, by the Quincy School District Superintendent and/or his/her designee at any time, with or without reason, upon written notification thereof to the Consultant.

Independent Contractor Status of Consultant

Consultant and consultant's employees shall perform all duties pursuant to this contract as an independent contractor.

Indemnification

Any and all claims which hereafter arise on the part of any and all persons as a direct or indirect result of consultant or consultant's employees' or agents' performance or failure to perform duties pursuant to this contract, shall be consultant's sole obligation.

Termination

This contract may be terminated by the Superintendent and/or the Business Manager upon written notification thereof to the consultant. In the event of termination by the district, consultant shall be entitled to an equitable proration of the total compensation provided for herein for uncompensated services which have been performed as of termination.

Verbal Agreements

This written contact constitutes the mutual agreement of consultant and the district in whole. No alteration or variation of the terms of this contract and no oral understanding or agreements not incorporated herein, unless made in writing between the parties hereto, shall be binding.

Applicable Law

The laws of the State of Washington shall govern this contract.

Nondiscrimination

The consultant and consultant's employees assure Quincy School District #144 that its agency/labor union will comply with all state and federal guidelines and/or regulations. Therefore, all applicants seeking employment opportunities will be considered and will not be discriminated against on the basis of race, creed, religion, color, national origin, age, sex, marital status or non-job-related physical, sensory or mental disabilities, except insofar as such bases are valid occupational qualifications.

Checkoff List (unfinished document)

| PRIC | OR APPROVAL/REQUIRED DOCUMENTS |
|-------------|---|
| | Check school calendar. Be sure that you will not be in conflict with |
| | another event (at least 2 months in advance, avoiding holidays and community events). |
| | Activities Approval Form - receive prior approval for this activity? (ASB-Activities Approval Form was returned to you with a stamped approval from ASE (Chaperones (6) must sign their names on the activities approval form before submitting to ASB) (General Fund – Approval from building principal) |
| | Facilities approval form (i.e. weekend custodial, building site). |
| | Select a vendor (must have a W9 on file). Is this vendor active in our system? (If the vendor is not active, contact your building Administrative Assistant to start the W9 process). |
| | Fill in the Contract for Personal Services form, sign, and date and print out contract. |
| | Receive proof of insurance with QSD listed as an additional insured or Hold Harmless Agreement. (Required) |
| | Forward contract & Proof of Insurance or Hold Harmless Agreement to the District Office for approval. |
| | Once the contract is approved, fill out a requisition for each vendor or consultant (i.e. DJ/Band, photographer, supplies, police officers, and decorations). |
| | Forward all documents to your building Administrative Assistant to attach these documents to the purchase order. |
| | Contact police department as soon as dates confirmed. |
| | Contact Gus Winter as soon as dates confirmed. |
| | Request cash box (ASB – Carol Sanchez). |
| TWO | D DAYS PRIOR TO EVENT |
| | Two days prior to event, make a follow-up call to confirm and remind police of dance. |
| EQU | IPMENT SET UP Contact Tom Harris prior to vendor set up of equipment. |
| <u>CLE</u> | AN UP |
| | Deposit slip and money bag to bank night deposit. |