Tumwater School District No. 33

621 Linwood Avenue, SW Tumwater, WA 98512



Contract for Personal Services

| Date | P.O. # |
|--|---|
| Consultant's Name | Phone # |
| Address_ | City/State/Zip |
| This contract shall commence on(Month/co | , and shall terminate |
| at midnight on | |
| In consideration of the promises and conditions co district and the consultant do mutually agree as f | ontained herein and Applicable Law (reverse side), the follows: |
| the district principal/administrator on (specify da | at shall perform the following duties to the satisfaction of tes) and during ecify location) |
| responsibilities set forth herein, the Tumwater So | tion of the consultant's satisfactory performance of the chool district shall compensate the consultant as follows: |
| payment(s) in the amount of \$ the payment(s) for services rendered not to exceed materials, etc. are to be included in the total cost | |
| | t No. 33 and consultant have executed this contract: |
| District Principal/Administrator's Signature | Consultant's Signature |
| Date: | Date: |
| District Superintendent or Financial Director | ☐ Consultant's Social Security Number ☐ Tax Identification Number |
| | Preferred Method of Payment □Direct Deposit □ Credit Card □Check |

Applicable Law

- 1. Consultant shall perform all duties pursuant to this Contract as an independent contractor. Tumwater School District shall not withhold or pay any taxes on behalf of Consultant.
- 2. This contract may be terminated, by the Tumwater School District Superintendent and/or his/her designee, at any time, with or without reason, upon written notification thereof to the Consultant.
- 3. Independent Contractor Status of Consultant: Consultant and consultant's employees shall perform all duties pursuant to this contract as an independent contractor. Contractor will maintain Workers' Compensation Coverage as required by law.
- 4. 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 employee's or agents' performance or failure to perform duties pursuant to this contract, shall be consultant's sole obligation.
- 5. **Termination:** This contract may be terminated by the Superintendent and/or the Director of Financial Resources 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.
- **6. Verbal Agreements:** This written contract constitutes the mutual agreement of consultant and the district in whole. No alteration or variation of the terms of this contract and no oral understandings or agreements not incorporated herein, unless made in writing between the parties hereto, shall be binding.
- 7. **Applicable Law:** The laws of the State of Washington shall govern this contract.
- 8. Nondiscrimination: The consultant and consultant's employee's assures Tumwater School District No. 33 that its agency/labor union will comply with all state and federal guidelines and/or regulations. Therefore, all applicant's 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.
- 9. Suspension & Debarment: Federal Executive Order (E.O.) 12549 "Debarment and Suspension" requires that all contractors receiving individual awards, using federal funds, and all sub-recipients certify that the organization and its principals are not debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency from doing business with the Federal Government. Your signature certifies that neither you nor your principal is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 10. Background Check: Contractor shall fill out the attached Contractor Disclosure form and submit the form to the district office prior to the beginning of this contract. Contractor shall require a criminal history records check (in accordance with RCW 28A.400.303 or 1996 Washington Laws, Chapter 126) for all persons providing services pursuant to this contract. Contractor shall certify compliance with this condition on or before beginning work pursuant to this contract. Contractor shall not employ any person to perform services pursuant to this contract who has pleaded guilty to or been convicted of any felony crime(s) against children, as specified in RCW 28A.400.330. Failure to comply with this condition shall be grounds for immediate termination of the contract by the School District.

| Consultant's Initials: | Date: |
|------------------------|-------|
| Compartant 5 millians. | Bate: |

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Personal Service Contractor's Certifications

| Business Name: Pl | | | hone #: | | | |
|---|--------------------|----------------------|----------|------------|--|--|
| (Address) | (City) | (State) | (Zip Co | <u>de)</u> | | |
| Washington State Unified Business Identification Number Certification | | | | | | |
| Vendors doing business with Tumwater S Washington State Unified Business Ident following questions is "Yes." Please check | tification Number | · (UBI #) if the ans | wer to | any of the | | |
| 1. Does your business gross more than | \$12,000 per year | 9 | Yes | No | | |
| Does your business gross more than Does your business sell any item(s) at | | • | | | | |
| 3. Does your business repair, install, alt | | n, construct or | _ | _ | | |
| improve any real or personal prope | erty for consumer | rs? | | | | |
| 4. Is your business required to collect or | | ax to the | | | | |
| Washington State Department of I 5. Is your business required to obtain a | | o from | | | | |
| Washington State? | renewable ncens | e mom | | | | |
| 6. Is your business incorporated? | | | | | | |
| If "Yes" to any of the above, provid | le UBI # here: | | | | | |
| Early Retireme | ent Factor Ce | ertification | | | | |
| The individual completing this Personal "Yes" (true) or "No" (false) to the following | | or Certification for | | | | |
| I have retired from a Washington State I | Retirement Syste | m using the 2008 | Yes | No | | |
| Early Retirement Factor (ERF). | terrement by ster | in using the 2000 | | | | |
| If answering "Yes," enter your Soc | ial Security # her | 'e: | | | | |
| Note: Individuals retiring with the by completing this contract. | 2008 ERF may j | eopardize early ret | iremen | t benefits | | |
| Certification: I hereby certify under am authorized to sign on behalf of the bu | | - | s true a | nd that I | | |
| Signature: | Signature: | | | | | |
| | | | | | | |

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Personal Service Consultant's Invoice

| Date | P.O. # | | | |
|---|----------------------|--|--|--|
| Consultant's Name | Phone # | | | |
| Address | City/State/Zip | | | |
| I hereby claim reimbursement for (specify amount) \$ | as Consultant for th | | | |
| following services (use additional paper if necessary): | | | | |
| Date(s) | | | | |
| Time(s) | | | | |
| Location(s) | | | | |
| Description of Service(s) | | | | |
| | | | | |
| | | | | |
| I certify that this is a just and due claim | | | | |
| Consultant's Signature | SS# or Tax ID# | | | |
| Consultant a Dignature | υν π οι 1 αλ 1D π | | | |
| Date | | | | |

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