

Bellingham School District No. 501
Independent Contractor Qualification Analysis

This form is used to help decide whether an individual who wishes to provide a service to the Bellingham School District will be paid as an Independent Contractor through Accounts Payable or a Temporary Employee through Payroll. If you have questions about this form, contact Denise Suess at 676-6522.

I. Identification of potential independent contractor:

Company of record (individual's name or company name)

_____ Telephone Number _____

Company Address _____

II. With assistance of potential contractor, answer all questions below (if all are answered "yes" the individual will be paid as an Independent Contractor through Accounts Payable):

A. Potential contractor maintains a place of business where he/she can prepare and perform most of the work necessary to execute contracts for Bellingham School District? Yes No

B. If the answer to the above is "yes", give the address: _____

C. If the answer to "A" above is "yes", are the costs of maintaining the place of business deductible when calculating the potential contractor's federal income tax? Yes No

D. Potential contractor holds himself/herself out to the public as providing contractual services to anyone desiring to purchase them? Yes No

E. Potential contractor advertises/promotes his/her business? Yes No

F. Potential contractor is registered with the State of Washington or other appropriate bodies to be engaged in business? Yes No

G. If "F" above is "yes", provide UBI, tax ID or other number: _____

H. Potential contractor understands there is the potential of gains and losses when contracting with the Bellingham School District? Yes No

I. Potential contractor keeps a separate set of books to account for all revenues and expenditures? Yes No

III. Potential contractor certification/signature: I hereby certify under penalty of perjury that the above is true and accurate, and I understand that this information will be used to evaluate whether or not I will be able to perform work for Bellingham School District as an Independent Contractor or as a Temporary Employee. I understand, if there are any changes to the above, I will notify Bellingham School District, in writing, within ten days of said change.

Signature: _____ or by phone: _____

Date: _____

IV. Determination by Bellingham School District: Based upon the above information, obtained from this potential contractor, I hereby determine that this potential contractor should be treated as a:

1. Independent Contractor Send this form, Requisition, [Consultant Contract Form](#), [Retirement Status Form](#) and [W-9](#) to Accounts Payable
2. Temporary Employee Send this form, Request for Personal Services Contract (PSC) and all documents specified on the PSC Forms List to Human Resources

Principal/Program Manager: _____