

BELLINGHAM PUBLIC SCHOOLS
1306 Dupont Street
BELLINGHAM, WA 98225

REQUEST FOR PERSONAL SERVICES CONTRACT

A. TO BE COMPLETED AND APPROVED BY THE SCHOOL BOARD PRIOR TO PERFORMANCE OF SERVICES:

Services to be Performed by:		
Name:		Phone #:
Address:		
Social Security #:		
Description of Services:		
Will this individual have regular, unsupervised access to students? <i>(Note: If yes, fingerprinting is required [cost to be borne by service provider] PRIOR TO PERFORMANCE OF SERVICES. A fingerprint packet may be obtained from the Human Resources Office.)</i>	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
Date(s) of Services:		
Fee:		
Expenses (if applicable): (Original receipts required)		
Account Code:		

B. To be signed by service provider and returned to the building/program administrator with required employment paperwork prior to performance of services:

NOTE: HOURS MUST BE DOCUMENTED ON A TIME SUMMARY FORM AND SUBMITTED TO THE PAYROLL DEPARTMENT AFTER SERVICES ARE COMPLETED. ALL FEES ARE PROCESSED THROUGH PAYROLL AND ARE SUBJECT TO STANDARD PAYROLL DEDUCTIONS/TAXES.

Signature _____ Date _____

C. AUTHORIZED BY:

1. Building/Program Administrator: _____ Date: _____

2. Central Office Administrator: _____ Date: _____

FINAL PERSONAL SERVICES CONTRACT
WILL BE ISSUED FOLLOWING BOARD APPROVAL.