

Santa Fe Independent School District
Independent Contractor Packet
(2021-2022)

Please complete all documents in this packet and scan to
Bryan.Holliday@sfisd.org:

Independent Contractor Agreement

W-9

Criminal History Record Information
Addendum

Independent Contractor Calculator

If you have any questions or concerns call our
Purchasing Specialist at 409-925-9026

SANTA FE INDEPENDENT SCHOOL DISTRICT INDEPENDENT CONTRACTOR AGREEMENT

This agreement is made between the Santa Fe Independent School District (The District), and _____, (Independent Contractor). The Santa Fe ISD representative recommending this independent contractor is _____.

Whereas the district has need for the following services:

We, therefore, for and in consideration of the foregoing, agree to the following payment:

This agreement shall not be interpreted or construed as creating or establishing the relationship of employer and employee between the district and the independent contractor. The independent contractor agrees to indemnify and hold harmless, the district from all claims and liabilities due to the acts or omissions of the independent contractor. This agreement shall commence on _____ and terminate on _____. It may be amended or terminated by mutual agreement of both parties within one (1) week written notice to either party prior to the date of acceptance. Independent Contractors are paid net 45 days. To process a payment an invoice with dates and times of services rendered must be submitted to the budget manager for approval. Campus bookkeeper will then submit the invoice to Accounts Payable for payment. Invoices can not be submitted until services are rendered. The independent contractor agrees to complete and return to the district the attached W-9 form, "request for Taxpayer Identification Number and Certification", and show proof of identity through a valid photo ID.

Executed this ____ day of _____, 20__.

Signature of Independent Contractor

Signature of Director/Principal/Budget Manager

Signature of Assist Superintendent of HR

Signature of Chief Financial Officer

*Signature indicates fingerprints and/or criminal history have been completed

To be completed by person responsible for HIRING the independent contractor. Please answer the following:

Will the contractor be working with students? (check one) ___ Yes ___ No

Has the contractor been fingerprinted? (Check one) ___ Yes ___ No

THE INDEPENDENT CONTRACTOR MAY NOT BEGIN WORK UNTIL A BACKGROUND CHECK AND FINGERPRINTING, (IF APPLICABLE), ARE COMPLETED.

Request for Taxpayer Identification Number and Certification

Give Form to the
 requester. Do not
 send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	Exempt payee code (if any) _____
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.	Exemption from FATCA reporting code (if any) _____
	<input type="checkbox"/> Other (see instructions) ▶ _____	<small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code		
7 List account number(s) here (optional)		

Part I	Taxpayer Identification Number (TIN)																					
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.																						
Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.																						
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Part II	Certification
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and	
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and	
3. I am a U.S. citizen or other U.S. person (defined below); and	
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.	

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
 - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
 - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
 - Form 1099-S (proceeds from real estate transactions)
 - Form 1099-K (merchant card and third party network transactions)
 - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

SANTA FE INDEPENDENT SCHOOL DISTRICT

Criminal History Record Information Addendum

FOR NON-CERTIFIED APPLICANTS ONLY

****CONFIDENTIAL****

The Santa Fe Independent School District is authorized and required by Senate Bill 9 referred to as the "Fingerprinting Bill" to obtain criminal history record information through fingerprinting on all applicants being considered for employment (Texas Education Code 22.0833 and 22.085). The information requested below is necessary to obtain criminal history record information and will be added to the Fingerprint-based Applicant Clearinghouse of Texas (FACT).

PLEASE PRINT.

POSITION(S) APPLYING FOR _____

NAME _____
Last First Middle (optional)

SOCIAL SECURITY NUMBER _____

DRIVERS LICENSE _____
State Number Type

ADDRESS _____
Street City State Zip Country

PHONE NUMBER _____
Home Cell (optional) E-mail (mandatory)

DATE OF BIRTH _____ **ETHNICITY** _____
Month Day Year Black White Hispanic American Indian
Asian or Pacific Islander Unknown / Other

SEX _____ **HEIGHT** _____ **WEIGHT** _____ **EYE COLOR** _____ **HAIR COLOR** _____
(F=Female, M=Male)

PLACE OF BIRTH _____ **COUNTRY** _____

I understand that the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for employment, but will be used solely for the purpose of obtaining criminal history record information.

Signature Date

Have you previously worked for a School District in Texas? YES NO
If Yes – Have you been fingerprinted through a School District? YES NO
If Yes – What is the name of the District? _____

OFFICE USE ONLY

FINGERPRINTING APPOINTMENT

OFFICE USE ONLY

APPLICANT IS: _____ CLEARED _____ NOT EMPLOYABLE _____ DISTRICT WITHDREW EMPLOYMENT OFFER _____ APPLICANT REFUSED OFFER