

**SANTA BARBARA CITY COLLEGE
CONSULTANT/INDEPENDENT CONTRACTOR FORM**

It is essential that all of the requested information be filled in completely and must be received in the Human Resources Office **by the deadline date listed on the Board Agenda Calendar provided.** Please understand that the information collected here will be used to make a determination that may have to be defended by the college's legal and business department if audited by the IRS or the State EDD, where applicable. Please be as complete and accurate as possible. *It is very important that you include any and all documentation requested. If any documentation is missing or unavailable, it may delay approval of the work agreement.* **OUT-OF STATE VENDORS AND CONSULTANTS MUST PRE—SIGN Forms 587 and a W-9 pursuant to CA Tax Laws. No one can work until those forms, available from Accounting are signed where needed and until the consultant is Board approved.**

Name of Hiring Manager (print) _____

Board Date: _____

Title of Hiring Manager _____

Budget #: _____

Amount: \$ _____

Department (print) _____

Indicate fund source: _____

Dates of Service: _____

Name of Contractor	Social Security #
Phone No.	Tax ID #
Company Name, if applicable:	Address: Email Address:

This portion to be completed and signed by contractor

1. If contractor is operating under a business name, is the business a

1a. Sole Proprietorship?

Yes No

Fictitious name statement? _____ Number: _____ Tax ID # _____

1b. Corporation?

Yes No

Date of incorporation: _____ Type of Corporation _____

Do you pay yourself on a Form W-2?

Yes No

2. Unique expertise

If "yes" describe

Yes No

3. Are you a relative or domestic partner of anyone who works at Santa Barbara City College? If yes, please list their name/s, relationship, and department in which they work.

Yes No

4. Have you ever been an employee of this college? If Yes, please give dates and state the nature of that work.

Yes No

5. If the answer to #4 is Yes, are the services that you will be providing to this college similar to those you performed as an employee?

Yes No

If No, in what ways are they different? _____

6. List licenses to do business in the area of expertise for which you will be a consultant, if applicable? Yes No

Business license #: _____ Professional license #: _____

Musician/Actors Union #: _____ Other _____

7. Are you performing similar consulting services for other companies at this time? Yes No

8. Please attach a copy of your business card, letterhead, brochure, etc., that you use in your business.

I understand as a contractor that any work done by me pursuant to this agreement is work for hire and is the exclusive property of Santa Barbara City College. I agree to submit all work to the college promptly upon completion of each project specified in this agreement and understand that final payment is not due until the college has received my completed work.

Signed: _____ Date: _____
Contractor

This portion must be completed and signed by College Manager and must be signed by area dean and vice president:

1. Services to be performed:

Please describe the work the contractor will be performing. Specify the expertise for which the contractor been selected. Include a narrative description of the services and describe any materials, reports, surveys, etc., that are to be furnished by the Contractor. Attach additional pages, if needed). Sufficient detail is required for the college to determine whether or not to approve this individual or entity as a contractor. Inadequate information may result in delay in the start of work by the Board approved contractor. **PLEASE DO NOT USE ACRONYMS.**

I propose that the above Contractor shall perform services for the College as set forth below:

2. I propose payments in consideration of the services and materials needed in order to perform as noted in paragraph1:

College shall pay an amount not to exceed \$ _____ to Contractor during term of this Agreement. Payment of the aforesaid sum shall be made in the following manner. List any benchmarks that will be required for payment.

3. Will this college provide training in order for Contractor to provide service? Yes No
If "yes" provide detail.

4. Will the manager on the project supervise Contractor? Yes No
If "yes" provide detail.

5. Will the college have the right to require interim reports from Contractor on this project? Yes No

6. Will this college expect Contractor to perform services personally? Yes No

7. Will Contractor supervise employees of this college? Yes No

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|--|-----|----|
| 8. Will Contractor supervise students of the college? | Yes | No |
| 9. Will this college require Contractor to work at specific or set hours? | Yes | No |
| 10. Will this college be exercising any control over how Contractor performs services?
If "yes" provide detail. | Yes | No |
| 11. Will the college reimburse Contractor for material, travel or expenses?
If "yes" receipts must be retained by hiring manager. The amount approved in this
must designate funding to cover all expenses. | Yes | No |
| 12. Will Contractor use his/her own tools, equipment or materials? _____%
or the college's? _____%
If "yes" provide details.
The college does not provide office space, computers, or support services to contractors. | | |
| 13. Can this college terminate the agreement for any other reason than
non-performance? | Yes | No |
| 14. Is this contract in excess of \$25,000 <u>and</u> is it to be paid from a Federal award? | Yes | No |
| If yes, is this contractor suspended or debarred per Excluded Parties List System at www.epls.gov | Yes | No |

I declare that I have no financial interest in the hiring of this Consultant/Contractor.

Signed: _____ **Date:** _____
(College Manager requesting services)

Print Name: _____

Signed: _____ **Date:** _____
(Area Dean)

Print Name: _____

Signed: _____ **Date:** _____
(Area Vice President)

Print Name: _____

Signed: _____ **Date:** _____
(Superintendent/President)

Print Name: _____

This portion to be completed and signed by Business Services or Human Resources. If contractor is a corporation and/or payment will equal or exceed \$25,000, a separate written agreement must be provided.

_____ is approved for hire as an independent contractor based on his/her representations and the representations of the department manager.

A completed Agreement _____ will be required.
_____ will not be required.

Signed: _____ **Date:** _____
V.P. Business Services or V.P. Human Resources