

**TAYLOR COUNTY SCHOOLS
CONTRACTED SERVICES AGREEMENT
PART-TIME HOURLY**

Date: _____

Contract #: _____

1. This AGREEMENT entered into this ___ day of _____, 20__ by the _____, acting for and on behalf of the TAYLOR COUNTY DISTRICT SCHOOL BOARD (“TCDSB” herein), and (“CONTRACTOR” herein). The CONTRACTOR is an independent contractor and will perform all services and furnish all labor at the CONTRACTOR’s risk assuming full responsibility for completion of the following services (See Attachment “A” for description of services to be provided): Contractor must also complete a W-9 form to verify eligibility to work and will receive a form 1099 in January to report earnings for income tax purposes. The contractor is liable for any self-employment payroll taxes due, and as a contractor understands that as federal income taxes will be withheld. **See Attachment**

2. CONTRACTOR information:

Name: _____ SS# _____

Address: _____

Phone #: Home: _____ Cell: _____

Signature

Date

3. The CONTRACTOR shall commence performance of the conditions of this AGREEMENT on the ___ day of _____ and shall complete performance of this AGREEMENT to the satisfaction of TCBSB no later than the ___ day of _____, _____. Payment at the rate of \$_____ per hour/day/contract will be made upon completion of said services stated above and receipt of weekly time sheets. Total payment amount is not to exceed \$_____. NO SERVICES ARE TO BE RENDERED UNTIL A NOTICE TO PROCEED HAS BEEN ISSUED.

4. The CONTRACTOR shall perform the conditions of the AGREEMENT upon clearance using the Level 2 background screening by Suwannee County Schools. Documentation of clearance will be on file in the Personnel Office of Taylor County Schools.

5. All AGREEMENTS made between the TCDSB and the CONTRACTOR is contained exclusively herein. CONTRACTOR acknowledges that the payment above set forth constitutes the only compensation to be received by the CONTRACTOR for the services to be performed pursuant to this AGREEMENT. CONTRACTOR also acknowledges that in rendering the services herein provided for, the CONTRACTOR will be acting as an independent and not as an employee of TCDSB. This AGREEMENT may be terminated by SCS without penalty, upon giving ten (10) days advance written notice to the CONTRACTOR. This AGREEMENT shall be construed in accordance with the laws of the State of Florida. If this agreement exceeds \$10,000, a signed addendum must also be attached. If during the course of the week performed, the total dollar amount is expected to exceed \$10,000, a contract addendum must be completed at that time and attached to this agreement.

6. Payment Funding Source: _____

7. Approved by: Originator: _____ Personnel: _____ Instruction: _____ Finance: _____

Paul E. Dyal, Superintendent

Date

Taylor County School Board 318 N. Clark St. Perry, FL 32347

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Copy to CFO for filing (date/Initial) ___/___/___