



# Independent Contractor Analysis

Form 6220F-1  
 Management Support  
 1/1

## Business Office

### FOR MORE INFORMATION

Denise Suess: Auditing Officer (360) 676 6522

Corinn McCulloch: Accounts Payable Specialist (360) 676 6507

[denise.suess@bellingshamschools.org](mailto:denise.suess@bellingshamschools.org)  
[corinn.mcculloch@bellingshamschools.org](mailto:corinn.mcculloch@bellingshamschools.org)

Pursuant to Policy 6220, this form is used to help decide whether an individual who wishes to provide services to Bellingham Public Schools will be paid as an independent contractor through Accounts Payable or as a temporary employee on a personal services contract (PSC) through payroll.

### A. CONTRACTOR DETAILS

**Services Performed by:**

<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	First Name	Middle Initial(s)

**Business Name: (If different from above)**

**Mailing Address and Phone:**

<input type="text"/>	<input type="text"/>	
Street address, P.O. box	Apartment, suite, unit, building, floor, etc	
<input type="text"/>	<input type="text"/>	<input type="text"/>
City	State	ZIP code
<input type="text"/>	<input type="text"/>	
Phone	Email	

**Social Security Number/Business ID:**

### B. QUALIFICATION ANALYSIS

*If all questions below are answered "Yes" the individual will be paid as an independent contractor through Accounts Payable. If any are answered "No" the individual will be paid as an employee on a Personal Services Contract.*

	Yes	No
i. Potential contractor is providing a service which is outside the scope of duties and/or beyond the expertise of Bellingham School District employees?	<input type="checkbox"/>	<input type="checkbox"/>
ii. Potential contractor is free from the direction and control of the District as to the performance of the service to be provided?	<input type="checkbox"/>	<input type="checkbox"/>
iii. Potential contractor is independently established and offer their services to the general public?	<input type="checkbox"/>	<input type="checkbox"/>
iv. Potential contractor maintains a separate set of business records and files a schedule of expenses with the Internal Revenue Service?	<input type="checkbox"/>	<input type="checkbox"/>
v. The contracted services are for a specific project or time period rather than an ongoing service?	<input type="checkbox"/>	<input type="checkbox"/>

### C. DETERMINATION

**Based on the above information, obtained from the potential contractor, I hereby determine that this potential contractor should be treated as:**

- |                           |                          |   |
|---------------------------|--------------------------|---|
| 1. Independent Contractor | <input type="checkbox"/> | Send this form and draft Agreement for Services to Business Office for Review. After approval, enter requisition for services into Skyward. |
| 2. Temporary Employee     | <input type="checkbox"/> | Send this form, Request for Personal Services Contract (PSC) to Human Resources. <b>Board approval is required before hire.</b>             |

Principal/Program Administrator