

**Lynden School District No. 504**  
**Request for Approval of Independent Contractor/Educational Consultant Status**  
**For Personal Service Providers**

This section to be complete by Contractor/Educational Consultant

Name of individual providing service \_\_\_\_\_

Social Security Number (attach copy of card and W-9) \_\_\_\_\_

Please check "Yes" if the following statements are true regarding your independent contractor/educational consultant status: (please note that items 1-4 must be checked "Yes" in order to qualify as an independent contractor/educational consultant)

*The following statements are true regarding my independent contractor/educational consultant status:*

1. I am free from the direction and control of Lynden School District as to the performance of service to be provided.      Yes      No
2. I will be providing a service which is outside the scope of duties and/or beyond the expertise of Lynden School District employees.      Yes      No
3. I am independently established in my own business and offer my services to the general public.      Yes      No
4. I maintain a separate set of business records and file a schedule of expenses with the Internal Revenue Service.      Yes      No
5. I have registered with the Washington State Department of Revenue and other appropriate state agencies as required by Washington State Law.      Yes      No  
(if you check "no" on item 5, you must be able to check "yes" on item 6-8 in order to qualify as an Independent Contractor/Educational Consultant)
6. My gross annual income in the State of Washington is less than \$12,000.      Yes      No
7. I do not sell any items at retail.      Yes      No
8. I do not repair, install, alter, decorate, clean, construct or improve any real or personal property.      Yes      No

\_\_\_\_\_  
Contractor/Educational Consultant Signature

\_\_\_\_\_  
Date

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**This section to be complete by School or Department**

Describe the service this independent contractor/educational consultant will provide: \_\_\_\_\_

Will contractor/education consultant have unsupervised access to children?      Yes      No  
(If "yes" fingerprinting and a background check are required prior to contractor providing service.)

\_\_\_\_\_  
Requesting School/Department

\_\_\_\_\_  
Authorizing Signature