

## PERSONAL PROFESSIONAL SERVICES CONTRACT INFORMATION SHEET

This information sheet must be completed by any department who is in need of personal professional services. The person with whom you are contracting does not need to view or sign this form (but will need to sign the Contract for Personal Professional Services form). This form has been created to assist College departments and the Purchasing Department with assuring that the Contract for Personal Professional Services is being used correctly. These contract forms are not required for doing business with corporations, educational institutions, or governmental agencies. You can determine if a vendor fits these categories by looking at the vendor browse on eStaff, or on the vendor's Form W-9.

For the remainder of this form, the term "worker" refers to any person with whom the college desires to have a contractual relationship to perform personal professional services. Personal professional services may include (but are not limited to) consultants, health service providers, auditors, guest speakers or lecturers, and designers.

### Part I: Determination if a Contract for Personal Professional Services is Appropriate

1. Is the worker an employee of Santa Fe College?      Yes                      No

If yes, STOP! Contact SF Human Resources at x5185. If no, continue to question #2.

2. Does the worker perform similar work described herein for other entities besides Santa Fe College?  
Yes                      No

If yes, continue to question #3. If no, STOP! The person may to be treated as an employee, and thus would be ineligible for a separate contract. Contact the Purchasing Department at x5237 for more information.

3. Will the worker be required to comply with instructions about when, where, and (especially) how to work?                      Yes                      No

If yes to all three (when, where and how), STOP! The person may need to be treated as an employee. Contact the Purchasing Department at x5237 for more information.

### Part II: Other Requirements

Note the conditions below. If these conditions cannot be met, the individual must be treated as an SF employee and is not eligible for Contract for Personal Professional Services.

1. The College cannot hire, supervise, or pay for any assistants for the worker.
2. The College cannot pay for any business or traveling expenses of the worker.
3. The College cannot provide any related training to the worker
4. The worker may not hire or supervise SF employees in any capacity.
5. The worker cannot be paid by the hour, week, or month.

By signing below I am affirming that the answers to questions in Part I are true, and that the conditions listed in Part II will be met.

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Project Coordinator

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Budget Signature Authority

### Part III: Justification

Please provide a justification as to why you chose this particular individual to perform these services.\*

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\*Any College signatory may require additional information be submitted before approval.

### Further Instructions

1. Complete this form and obtain all required signatures on the Contract for Personal Professional Services form.
2. Send this form and the Contract for Personal Professional Services form to the Office of Purchasing, Robertson Administration Building, Room 42. The Office of Purchasing may investigate any contracts for appropriateness. A Purchase Order must be issued prior to the performance of any contract work.
3. When the work is complete, or if a partial payment is required, fill out a Consultant/Contract Services Payment Form and submit to Accounts Payable, Robertson Administration Building, Room 26.

**CONTRACT FOR PERSONAL PROFESSIONAL SERVICES**

Project Coordinator: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Campus Address & Extension: \_\_\_\_\_

Service(s) Needed: \_\_\_\_\_

**Recommended Contractor Information**

Contractor Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Contractor Email: \_\_\_\_\_ SF Vendor Number: \_\_\_\_\_

***If vendor is not active in the SF vendor system, or if their information has changed, attach a completed IRS W-9 form.***

Residency Status (check one):      Contractor is a U.S. citizen or permanent resident.  
    Contractor is a nonresident alien.<sup>1</sup>

***<sup>1</sup>Nonresident aliens must complete IRS form W-8BEN, and may be required to present additional information.***

**Contractor Operating Schedule**

Dates of Work (Inclusive): \_\_\_\_\_ Work Location (Campus or Division): \_\_\_\_\_

Person Employing, Working With, or Supervising Contractor: \_\_\_\_\_

Specifically state the work to be done and how it is to be completed (attach additional sheets if necessary):  
 \_\_\_\_\_  
 \_\_\_\_\_

**Cost Breakdown for Proposed Project**

Source of Funds: \_\_\_\_\_ Budget/Department Account Number(s): \_\_\_\_\_

Number of Days Required to Complete Contract: \_\_\_\_\_ Amount of Payment<sup>2</sup>: \_\_\_\_\_

<sup>2</sup>The amount of payment must be a whole amount, not an hourly rate. No travel or other business expenses are permitted.

**Notes to Contractor:**

1. You must receive a Santa Fe purchase order prior to any work being performed under this contract. This contract is void without an accompanying purchase order.
2. A form 1099-MISC may be sent to the address listed on this contract in January of the year following the work performed under this contract. If your address changes after the contract dates, please notify the Office of Purchasing (352) 395-5237.

Project Coordinator \_\_\_\_\_ Date \_\_\_\_\_ Consultant / Contractor \_\_\_\_\_ Date \_\_\_\_\_

Budget Signature Authority \_\_\_\_\_ Date \_\_\_\_\_

***Note: Be sure to complete the "Consultant/ Contractual Services Payment Form" when the contractual services are complete or for partial payment.***

President, Vice President, or Provost \_\_\_\_\_ Date \_\_\_\_\_ SF Board of Trustees Chair\*\* \_\_\_\_\_ Date \_\_\_\_\_

***\*\*Board Chair signature is only required for contracts valued over \$35,000***