



CHAPARRAL HIGH SCHOOL
EDUCATION FOUNDATION

INDEPENDENT CONTRACTOR AGREEMENT

Individual or Company Providing Services

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Email:** _____

Tax ID/Social Security Number: _____

Description of Services to be Provided: _____

Describe How Compensation is to Occur (Hourly Rate/Flat Rate, Deposit, Payment Schedule)

Name of Board: _____

Board Approval Date: _____ **Amount Budgeted:** _____

Treasurer Signature: _____

Contractor Signature: _____