AGREEMENT

Educational Consultant and Independent Contractor Agreement

Agreement made this_____ day of _____between the Oriskany Central School District Board of Education and _____("Contractor").

In consideration of the services set forth herein, it is covenanted and agreed between the parties as follows:

1. **The "Contractor" will perform services as an independent contractor for the Oriskany Central School District on an hourly basis for the period _____through _____or such other period as the participants agree, to perform a service, in the following manner:**

   _____

   _____

2. **The Oriskany Central School District Board of Education will pay the "Contractor" at a rate of _____ for the services to be performed by the "Contractor". Amount due shall be paid to the "Contractor" on an invoice basis commencing _____.**

3. **The "Contractor" acknowledges that he/she is performing services for the Oriskany Central School District Board of Education as an independent contractor, not as an employee, and that the services to be provided by him/her pursuant to this Agreement do not constitute employment by the "District". As such, no social security, retirement or other premiums shall be paid by the Oriskany Central School District on behalf of the "Contractor" and a Form 1099 will be issued to the "Contractor" for all monies paid to him/her. The "Contractor" further represents that he/she has no entitlement to employment or retention under either Civil Service Law, Education Law or any other authority.**

4. **Except as specifically otherwise provided herein, the "Contractor" agrees that this Agreement does not confer benefits of any type or nature whatsoever upon him/her and that he/she shall not assert any claim for benefits of any type or nature whatsoever, including, but not limited to, any claim for unemployment compensation benefits, or entitlements to any rights or benefits pursuant to any collective bargaining agreement now or hereafter in effect between the Oriskany Central District and its employees or for any other reason.**

5. **This Agreement may be terminated by either party upon ten (10) calendar days' written notice to the other party.**

6. **Are you OR have you ever been a member of the New York State Teachers' Retirement System? ☐ Yes ☐ No**

ACKNOWLEDGMENT OF SIGNATURES

Contractor _____	**Dated:** _____
Street _____	**Oriskany Central School District** **1313 Utica Street** **Oriskany, New York 13424**
City, State, Zip _____	_____ **Board of Education President**
Signature _____	_____ **School Business Administrator**
Social Security No. or Federal ID # _____	

BUSINESS OFFICE USE ONLY

Requested by _____ Vendor # _____

Account Code _____ Purchase Order # _____

* Payments cannot be authorized until all supporting documents and signatures are presented to the accounts payable office for processing. Copies of the contract will be retained in the business office for future reference.