

Dear Vendor,

Enclosed is your application packet. Please fill out the Services Agreement and W-9 Form. Turn the completed paperwork into Bekah Everett at the Independent Study Office. Once your application has been accepted and authorized, you will need to obtain a <u>Live-scan Form</u> for fingerprinting from Bekah Everett. You will need to take the <u>Live-scan Form</u> with you to a Community Service provider <u>such as</u> the Sonora Police Department (532-8141) or the County Schools Office (536-2000). <u>YOU'RE RESPONSIBLE FOR THE COST OF THE FINGERPRINTING</u>.

You will also find a "<u>Student Introduction Form"</u>. This is a sample so that you know what it looks like. Every student with Gold Rush Home Study Charter School *must* present this form to you completed by his or her teacher to be kept by you. This is your assurance allowing you to invoice Gold Rush Charter School for services rendered. Please use the "<u>Vendor Course Instructor Invoice"</u> enclosed to present your bill to us. Invoices must be submitted on a monthly basis.

You must show proof of LIABILITY INSURANCE to be a vendor with Gold Rush Charter School if we are your only source of income.

If you have other income we will need verification in the form of a letter from your other source of income. Upon receipt of letter from other source will waive the need for proof of Liability Insurance.

We thank you and look forward to doing business with you.

Thank you-Gold Rush Charter School



(\$5,000 or Les THIS AGREEMENT shall be between the 0	s) REV. 6/15/20 Gold Rush Charte	
The compensation amount will be: \$25.0	0 per Month, p	<u>er student</u> .
THE TERM OF THIS AGREEMENT shall be continue through the 31st day of June 2		e, and shall
THIS AGREEMENT MAY BE TERMINATED by other party thereto. INSURANCE	y giving 10 days	written notice of termination to the
Neither the Charter School nor district assumes liabiliting injury to person(s) or property during or relating to the		
The Contractor agrees to hold harmless and to indemoperson or property sustained by the contractor or by a Indirectly by the contractor or by any of the individua injury to person or property sustained by any person, omission, of the Contractor, or of any person, firm, or Contractor upon or in connection with the Agreement out of or in the course of the form of this Agreement, a shall defend any and all actions, suits, or other legal proceedings the district in any such action, suit or legal proceedings.	any personal firm o als participating in o firm or corporation corporation directly t, or any other perso and the Contractor a roceedings that may and pay or satisfy any	r corporation employed directly or associated with him/her, and any and any and any act, neglect, default or y or indirectly employed by the on/parties performing services arising at his/her own cost, expense and risk, y be instituted against the district or Gold y judgment that may be rendered against
Nothing herein provided shall be construed to rec Rush Charter School for liability or damages resu school or its officers, agents, or employees.		
Regarding discipline of the students: There is to leave the statements. Please have student sit out of or parent about behavior in question		
Sole proprietor Yes \(\square\) No \(\square\) If Yes, Owner's Nam	ne	Social Security #
Contractor (Vendor) Name (please print)		
Contractor Address	()	
Contractor Signature	Phone #	Email

Date

Executive Director



STUDENT INTRODUCTION FORM

This form must be completed by the assigned teacher of any student wishing to receive vendor services. A copy must be presented to the vendor BEFORE Gold Rush Charter School can be billed for services.

Student Nar	ne:	
Assigned GI	RCS Teacher:	
Grade:	Vendor:	
	For school year 2017-	·2018
XAssigned	GRCS Teacher Signature	

Gold Rush Assigned Instructors need to make 1 copy of this form.

- 1) The original should be given to the student to submit to the vendor
- 2) One copy for Brittney Schertz

Vendor Course Instructor Invoice

Invoices must be submitted monthly

To: Gold Rush Charter School

Services Rendered: ______ to _____2017/2018

Not to exceed \$25.00 per month, per student							
Dates:	Subject	Student Name	GRCS Teacher	Total Hours	Total Fee		
			Total Due:	\$			
		·					

** For payment, Please fax Invoice to Brittney Schertz **
The fax # to Accounts Payable Dept. is: 209-588-8482
Email is: bschertz@goldrushcs.org

or mail to: Gold Rush Charter School
Attn: Brittney Schertz
16331 Hidden Valley Road

Make check payable to:

Name:_____Address:_____Phone:_____Email:

Sonora, CA 95370

Thank You