

# Leech Lake Band of Ojibwe

## **Procedures for obtaining Professional Service Contracts and Processing Documents**

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1. Define the need.
2. Prepare the scope of work.
3. Determine if work can be adequately performed by an employee or if an Independent Contractor is required.
4. If an Independent Contractor, solicit via Competitive Proposal or Sole Source.
5. Evaluate proposals and select a Independent Contractor.
6. Have the Independent Contractor sign the *Independent Contractor Worksheet* and contract form(s).
7. Submit an original and three (3) copies to Purchasing, including all required documentation.
8. Purchasing reviews the submission and certifies Independent Contractor or employee status and adds request to the next Contract Review Board (CRB) meeting agenda.
9. The CRB reviews the submission and certifies compliance with the IRS, Purchasing, Legal and the Risk and Insurance requirements.
10. If approved, Purchasing will obtain signatory authorization. If not approved, all documents will be returned to originator with an explanation of non-compliance.
11. Purchasing will issue a Purchase Order and the Independent Contractor can be given a Notice to Proceed.
12. The Independent Contractor delivers, certifies that the work has been completed per the contract and invoices the Leech Lake Band of Ojibwe.
13. The division/department reviews the invoice, using the “Progress Payment Approval Form” or “Final Payment Approval Form” certifies that the service has been preformed and is acceptable, and presents it to Accounts Payable within 10 days of receipt.
14. Accounts Payable pays the invoice in accordance with A/P Policy.

# CHECKLIST

## Required Documentation/Information for Processing

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### Independent Contractor Worksheet: Part A

- |   |  |
|---|--|
| <input type="checkbox"/> Alien vs. Non-Alien Statement    | <input type="checkbox"/> Certificate of Workers Compensation Insurance (or waiver) |
| <input type="checkbox"/> List of Clients                  | <input type="checkbox"/> Certificate of General Liability Insurance (required)     |
| <input type="checkbox"/> Resume                           |  |
| <input type="checkbox"/> Signed by Independent Contractor |  |

### Independent Contractor Worksheet: Part B

### Independent Contractor Worksheet: Part C

- Scope of Work
- Selection Criteria/Price Quotes
- Funding
- Project Number
- Budget for Project
- Signatures of Division Director and Purchasing

### Contract Review Board Request Form:

- Completed and Signed

### Independent Contractor Agreement:

- Time Frames
- Signed by Independent Contractor
- Completed W-9
- Signed Hold Harmless Agreement
- Approved by LLBO Legal Department

### Employee-Vendor Conflict of Interest Disclosure Form:

- Completed and Signed, (if a current employee of the LLBO)

### Independent Contractor/Consultant Award Summary:

- Completed and Signed

### Purchase Requisition:

- Completed and Signed

### Payment Certification:

- Employee-Vendor Conflict of Interest Form, Completed and Signed.
- Progress Payment Authorization Form, Completed and Signed (submit with invoice).
- Final Payment Approval Form, Completed and Signed (submit with final invoice).

**Leech Lake Band of Ojibwe  
Independent Contractor Worksheet**

**Part A: To be completed and signed by proposed Independent Contractor  
(W-9 form to be attached)**

Name of Individual, Sole Proprietorship, Business Name, Partnership, or Corporation:

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

Telephone Number: \_\_\_\_\_

Fax: \_\_\_\_\_

In what capacity will you be working? (Check and complete any that apply):

**Individual**  
If yes, provide Social Security Number

**Partnership**  
If yes, provide EIN/SSN

**Foreign Individual**  
If yes, *do not use this form*. Foreign  
Individuals **must** be paid through the  
Payroll Office.

**Corporation/Company**  
If yes, provide EIN  
\_\_\_\_\_  
If yes, do you provide services to clients  
Other than the LLBO?  
**Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Sole Proprietor**  
If yes, provide SSN  
\_\_\_\_\_

If the proposed contract is **sole source** with an individual, a **sole source** with a partnership, or a **sole source** with a corporation/company that provides services **only to the LLBO**, Independent Contractor must print his/her name here \_\_\_\_\_ and **answer questions 1-8 below**.

If the proposed contract is a **sole source** with a corporation/company that has clients other than the LLBO, or if the proposed contract is based on a **competitive** process (via print competitive bid or competitive proposal), **skip directly to question 7 below**.

- 1. Yes\_\_\_ No\_\_\_ Are you currently employed by the LLBO in any capacity?
- 2. Yes\_\_\_ No\_\_\_ Have you been employed by the LLBO in any capacity during the past 12 months?
- 3. Yes\_\_\_ No\_\_\_ Are you providing the same services to the LLBO (either this department or other department) on a continuing basis or at a frequently recurring intervals (e.g. weekly, biweekly, monthly, seasonally, etc.)?
- 4. Yes\_\_\_ No\_\_\_ Do you make your services available only to the LLBO, rather than to the general public or other outside businesses?
- 5. Yes\_\_\_ No\_\_\_ Is the LLBO responsible for your liability insurance?
- 6. Yes\_\_\_ No\_\_\_ Are you a non-resident alien (i.e. do you *not* have an Alien Registration Card or "Green Card"?). If yes, what is your visa type?  
\_\_\_\_\_.
- 7. Attach a list of other clients for whom you have worked, including dates of engagement.
- 8. Attach your Resume.

**I certify that the facts stated above are True and Accurate to the best of my knowledge.**

\_\_\_\_\_  
Signature of proposed Independent Contractor

\_\_\_\_\_  
Date

**Leech Lake Band of Ojibwe  
Independent Contractor Worksheet**

**Part B: To be completed by Division/Requestor**

<p>If the proposed contract is <b>sole source</b> with an individual, a <b>sole source</b> with a partnership, or a <b>sole source</b> with a corporation/company that provides services <b>only to the LLBO</b>, you <b>must answer questions 9-23 in Part B below</b>, and then go on to <b>Part C (questions 24-28)</b>.</p>	<p>If the proposed contract is a <b>sole source</b> with a corporation/company that has clients other than the LLBO, or if the proposed contract is based on a <b>competitive</b> process (via print competitive bid or competitive proposal), <b>skip directly to Part C (questions 24-28)</b>.</p>
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9. Yes\_\_\_ No\_\_\_ Are the services provided by the individual an integral part on the LLBO's operations, like those already performed by others within established job classifications (e.g. clerical work, teaching, or research)?
10. Yes\_\_\_ No\_\_\_ Does the LLBO provide tools, equipment, material and /or support services to the individual for the work performed?
11. Yes\_\_\_ No\_\_\_ Can the individual perform the work without making or having made any investment in equipment or facilities?
12. Yes\_\_\_ No\_\_\_ Is the work required to be performed at LLBO, or in specific places designated by LLBO?
13. Yes\_\_\_ No\_\_\_ Is the work schedule and/or sequence of work set by someone at the LLBO?
14. Yes\_\_\_ No\_\_\_ Is the individual required to devote his/her full time effort to the department for which the work is being performed?
15. Yes\_\_\_ No\_\_\_ Is the LLBO providing detailed instructions or training to enable the individual to perform the work in a particular way or manner?
16. Yes\_\_\_ No\_\_\_ Does the individual report to or supervise a LLBO employee, or other individuals hired or supervised by LLBO?
17. Yes\_\_\_ No\_\_\_ Is the individual being paid \$25.00 per hour or less on an hourly basis?
18. Yes\_\_\_ No\_\_\_ Is the method of payment based on hourly, weekly, or monthly fees (as opposed to by the project)?
19. Yes\_\_\_ No\_\_\_ Can the individual end his/her working relationship with the LLBO at any time without incurring liability for failure to complete the job (e.g. forfeit of payment previously made by the LLBO or due under contract, or breach of contract liability)?
20. Yes\_\_\_ No\_\_\_ Is the individual subject to dismissal for reasons *other than* non-performance of contract specifications?
21. Yes\_\_\_ No\_\_\_ Must the work be performed specifically by the individual (rather than by someone else employed by the individual)?
22. Yes\_\_\_ No\_\_\_ Are regular or oral written reports required to be submitted to the LLBO by the individual?
23. Yes\_\_\_ No\_\_\_ Can the individual perform the work for the LLBO without any risk of direct economic loss to himself/herself?

**Note:**

If any answer to questions 1-6 in Part A and/or 9-23 in Part B is "Yes", further information may be required by the LLBO in order to insure that the individual is properly categorized as an Independent Contractor. The relevance of each question must be assessed in light of the facts and circumstances involved in the individual's performance of the work.

**Also complete Part C**

**Leech Lake Band of Ojibwe  
Independent Contractor Worksheet**

**Part C: To be completed by and signed by Division/Requestor and Purchasing**

**Please answer all of the questions for proposed Independent Contractors:**

24. Describe in full (using Attachment 1-Scope of Work) the nature of services/scope of duties to be performed. Include in your response a description of how the services will be performed.

25. (Check one) This individual or entity was selected on the basis of:

Competitive Bid

Competitive Proposal

Sole Source Procurement

a. **If the selection was done as a Competitive Bid**, attach all quotes received.

b. **If the selection was done using a Competitive Proposal or Sole Source Procurement**, describe (using Attachment 2-Selection Criteria) the selection criteria used for the selection of the individual or entity. Address price, quantity, personal qualifications, prior experience, training, education, past performance, scheduling concerns, recommendations, or any other relevant factors.

c. **If the selection was done as a Sole Source Procurement**, additionally describe (using Attachment 3- Sole Source Justification) the full justification for the selection on that basis, and document the reasonableness of the proposed cost.

26. Account Number to be charged: \_\_\_\_\_

Program end date: \_\_\_\_\_

27. Specify Grant/Contract (if applicable): \_\_\_\_\_

28. Attach budget for the individual or entity’s work, or indicate the basis for determination of the fee (hours/days/other time required, other costs).

I certify that this work is Necessary, Reasonable, and Allowable under the terms of this Grant/Contract Award (if any), and that funds are available for the specified services. Further, I certify that the facts stated above are true and accurate to the best of my knowledge.

**Division /Program Requestor**

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

Telephone Number: \_\_\_\_\_

Department: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Purchasing:**

Employee (process through Payroll)

Independent Contractor (process through Accounts Payable)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Accounting/Budgeting:**

Funds Available:      Yes    No (return to Requestor) Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## Attachment 1-Scope of Work

**Describe in full the nature of services/scope of duties to be provided. Include in your response a description of how the individual/entity will perform the services.**

**Purpose:** Briefly describe the overall goals and objectives of the project:

**Discussion:** Define the need for the Independent Contractor:

State the Terms of the Agreement:

Where does the proposed Independent Contractor fit into the project's overall plan?

State the specific tasks the Independent Contractor will perform, where he/she will perform them and whose equipment he/she will use?

What are the deliverables under this contract?

**Note: That Parts A, B and C of this form (and required Attachments), along with the Requisition Form, Completed W-9, Conflict of Interest Disclosure Form, Independent Contactor Summary Form, and the Contract Documents, constitute a full package of paperwork. Incomplete packages will be returned to the Requesting Department.**

## **Attachment 1-Scope of Work**

**Describe in full the nature of services/scope of duties to be provided. Include in your response a description of how the individual/entity will perform the services.**

## **Attachment 2-Selection Criteria**

**Describe the Selection Criteria used for the selection of the individual or entity. Address price, quantity, personal qualifications, prior experience, training, education, past performance, scheduling concerns, recommendations or any other relevant factors.**

### **Method of Source Selection:**

Competitive Bid

Competitive Proposals

Sole Source

### **Evaluation Criteria:**

Quality of the Proposal

Personal Qualifications

Prior Experience

Training and Education

Past Performance

Scheduling Concerns

Price

### **Recommendation:**

What factors make this Independent Contractor or Entity the strongest candidate?

## **Attachment 2-Selection Criteria**

**Describe the Selection Criteria used for the selection of the individual or entity. Address price, quantity, personal qualifications, prior experience, training, education, past performance, scheduling concerns, recommendations or any other relevant factors.**

### **Attachment 3-Sole Source Justification**

**Describe the full Justification for the selection as Sole Source Procurement, including the reasons why no other individual or entity can perform the services to be provided. Provide documentation for the reasonableness of the proposed cost.**

**Sole Source Justification:**

The services are obtainable from only one source.

The provider of the services has unique qualifications.

An emergency situation (as defined in section #117-118 Emergency Purchases) or other circumstances exist which make competition impracticable or inappropriate.

**Cost Justification:**

Price Reasonableness.

Comparison to other similar service providers.