

**HAYWOOD COUNTY SCHOOLS  
CONTRACT FOR PROFESSIONAL SERVICE  
STATE OF NORTH CAROLINA-COUNTY OF HAYWOOD**

**THIS CONTRACT FOR PROFESSIONAL SERVICE**, hereinafter "Agreement" made and entered into this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by and between the HAYWOOD COUNTY CONSOLIDATED SCHOOLS BOARD OF EDUCATION, hereafter referred to as "Contractor", and \_\_\_\_\_, hereinafter referred to as "Non-employee Contractor",

**WITNESSETH:**

**WHEREAS**, Contractor desires to enter into a short-term agreement with a qualified person to perform specific coaching responsibilities for the athletic sport(s) described herein below, and;

**WHEREAS**, the Non-employee Contractor, desires and agrees to faithfully perform all specified duties required to coach the specified sport(s),

**NOW, THEREFORE**, in consideration of the terms of the Agreement, the Non-employee Contractor agrees to provide coaching services as follows and Contractor agrees to pay Non-employee Contractor according to the contracted amount stated below for the school year in which Non-employee Contractor is performing said duties as follows.

Non-employee Contractor agrees to follow and be bound by all rules, regulations and policies of Contractor.

<b>School &amp; Assignment:</b>	<b>Years Coaching Experience:</b>	<b>Contracted Amt:</b>	<b>Pay Option Selected:</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<b>Totals</b>			_____

- PAY OPTIONS:** (circle choice)
1. Full Payment in November for Fall sports
  2. Full Payment in February for Winter sports
  3. Full Payment in March for Spring sports
  4. Full Payment in May for any season

I understand that as a Non-employee, I will be issued a 1099 form and I assume the responsibility of reporting this payment. I further understand that as a Non-employee Contractor, I am not eligible for unemployment benefits.

**WHERE AS**, Contractor and Non-employee Contractor have signed and sealed this Agreement, this day and year above written.

\_\_\_\_\_  
Superintendent (Designee)

\_\_\_\_\_  
Non-employee Contractor

\_\_\_\_\_  
Principal

\_\_\_\_\_  
SSN/EIN of Non-employee Contractor

Date \_\_\_\_\_

**Must attach I-9 form**