

**Greater Albany SD 8J**  
**Administrative Regulation**

Code: **DK-AR**  
Adopted:

**Procedures Related to Temporary Personnel Services**

**Hiring Procedure**

1. Before you offer to hire someone to perform temporary personnel service, make sure that the service being provided is not replacing work currently done by a licensed or classified employee. If it is, STOP! We have a major problem, since you are now subcontracting, which is prohibited in our collective bargaining contracts.
2. If you set an amount for the performance of a specific service, be very clear as to the scope of the service and the expected time involved in the task. It is important for you to have a general idea of the hourly wage you are paying for the service.

**Payment Procedure**

1. When it comes time to pay for the service, the building principal needs to complete a "Payment Request Form for Temporary Personnel Services". All payments for temporary services will be processed through the district payroll system. There will be NO EXCEPTIONS!
2. All individuals paid for temporary services must have a W-4 on file with the district business office as well as informing the district as to their PERS status.
3. The Payment Request Form for Temporary Personnel Services is designed for nonstaff members and students. If you have a regular district employee performing additional temporary services, their request for additional compensation needs to be recorded on their regular time sheet.

Payment Request Form for Temporary Personnel Services

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

Payable To: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Social Security No: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

W-4 on file with District:     Yes     No    If no, please complete and submit a W-4

Member of PERS:             Yes     No

Budget Account Number to be charged: \_\_\_\_\_

The amount that will be paid for Temporary Services is \$ \_\_\_\_\_. This amount will be processed through the district payroll system, which deducts the legal amount for taxes, social security, worker compensation and PERS, if eligible.

Dates of Services covered by this request: \_\_\_\_\_

Description of services being performed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Temporary Personnel Signature: \_\_\_\_\_