



SERVICE PROVIDER as



INDEPENDENT CONTRACTOR MARKETING AGREEMENT

Washington Home Care LLC
dba Washington Homemaker and Companion Registry
P.O. Box 1244
Washington, CT 06793
203-577-8979
saraguillemette@gmail.com
www.washingtoncthomecare.com

Service Provider Name		Soc Sec/TIN
Current Street Address	City, State, Zip	
Cell phone	Home phone	
Service Provider Email		
Alternative Email/Phone		
Emergency Contact (please specify relationship)	Emergency phone/email	

Screening Questions (Required): Have you been convicted of a crime involving violence or dishonesty in a state court or federal court in any state? Yes ___ No

Have you been subject to any decision imposing disciplinary action by a licensing agency in any state, the District of Columbia, a United States possession or territory or a foreign jurisdiction? Yes ___ No

Previous Addresses (Last 3 Years):

1. _____
2. _____
3. _____



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Certification Statement: I certify that the statements made by me on this application are true and complete to the best of my knowledge and are made in good faith. I understand that if I knowingly make any misstatements of fact, I am subject to disqualification, dismissal, or other action pursuant to employment agency policy and procedure, and subject to criminal penalties as prescribed by law.

Service Provider Representations & Responsibilities. Service Provider represents and agrees as follows:

(a) Service Provider possesses the requisite skills, credentials and training to perform any Assignment that he/she accepts hereunder as an independent contractor, and understands that the Registry will not provide any supervision of any kind or nature.

(b) Service Provider shall submit to a thorough criminal background and reference check by the Registry to verify Service Provider's history, qualifications, training and experience.

(c) If the Registry proposes an Assignment to the Service Provider, and the Service Provider is interested, the Service Provider shall enter into discussions with the Service Seeker to attempt to reach agreement on pay rate, time availability and terms of engagement, and shall record those agreements by entering into a legal Agreement similarly titled "Homemaker Companion Service Provider Work Agreement"; and both shall come to a working agreement entered onto a written "Plan of Service".

(d) If engaged by a Service Seeker, the Service Provider shall provide the services specified in the agreed upon Plan of Service in a professional manner.

(e) Service Provider is legally authorized to work in the United States of America.

(f) The SSN or TIN provided by the Service Provider is validly issued by the United States Government and belongs to the Service Provider. Service Provider will complete, and provide the Taxpayer identification Number on IRS Form W-9, for the Service Seeker. Service Providers will download a IRS Form 1099 for the year in which they work.

(g) Service Provider shall carry professional Liability Insurance, including Errors & Omissions (E & O) insurance, during any Assignment hereunder and, if requested, shall provide evidence thereof to Registry and Service Seeker.

(h) Service Provider shall provide a copy of front and back of a current driver's license, current registration and insurance card to the Registry and, if requested, to the Service Seeker.



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(i) Gifts and Gratuities: Service Provider acknowledges that WHC LLC has a policy discouraging the receipt of gifts or gratuities from Clients. Service Providers must not solicit tips or gifts. If a Client offers a gift or tip, it must be modest in nature and not intended to influence the level or scope of services provided. Service Providers shall not accept cash gifts under any circumstances. Any gift received must be reported to the Registry.

(j) Mandated Reporter Status: Service Provider is hereby notified that he/she is considered a Mandated Reporter under Connecticut state law. This means the Service Provider is legally required to report any suspicion of abuse, neglect, exploitation, or abandonment of vulnerable individuals, including elderly or disabled Clients. Failure to report such incidents may result in legal consequences. Service Providers must become familiar with mandated reporter requirements and comply fully with all applicable laws.

(k) Elder Abuse Training Requirement: All Service Providers are required to complete the Elder Abuse Training provided by the Connecticut Department of Social Services (DSS) and submit a copy of the completion certificate to WHC LLC. The training is available at: <https://portal.ct.gov/DSS/Social-Work-Services/Social-Work-Services/Related-Resources>

Sara

<https://washingtoncthomecare.com/>