



INDEPENDENT CONTRACTOR FILE CHECKLIST

Name _____ Location/Program _____

** All Documents Must Be Completely and Accurately Filled Out and Signed with Title and Date **

Forms

- _____ Emergency Information Form - MUST BE FIRST IN FILE & MUST BE IN EMERGENCY BINDERS!!
- _____ Independent Contractor Form
- _____ Memorandum of Understanding (MOU)
- _____ W-9 Form
- _____ Confidentiality Agreement
- _____ Harassment, Discrimination, and Retaliation Prevention Notifications Acknowledgment

Background Check Forms

- _____ LIC 508 Criminal Record Statement
- _____ LiveScan Fingerprint Clearance
- _____ LIC 9182 Criminal Background Clearance Transfer Request (if applicable)
- _____ LIC 9163 Request for LiveScan Service / Fingerprint Transfer Form
- _____ SOC 341A Statement Acknowledging Requirement to Report Suspected Abuse of Dependent Adults
- _____ Reporting Elder & Dependent Adult Abuse Acknowledgment

Driver Items & Forms

- _____ CA Driver License
- _____ Auto Insurance
- _____ DMV Printout
- _____ Driver Agreement
- _____ Waiver of Auto Liability _____
- _____ Authorization for Release of Driver Record Information

Health Forms

- _____ LIC 503 Health Screening Report
- _____ TB Test Proof & Result

Training

- _____ First Aid / CPR Certifications Date of Initial Class: _____
- _____ Consumer Handbook Acknowledgment

HR Assistant Signature

Date