

# Independent Contractor Application



COMMERCIAL  
INDUSTRIAL  
PROPERTIES

Please print or type. The application must be fully completed to be considered. Attaching a resume and writing "see resume" is acceptable. If you need an accommodation to participate in the application process, please let us know.

Once completed email to: bob@cipaustin.com

**Commercial Industrial Properties** is committed to equal opportunity and does not discriminate in the selection of independent contractors and this application is for consideration as an independent contractor providing services to Commercial Industrial Properties. Completion of this application does not create an employment relationship.

## Personal Information

Name

|  |               |   |       |     |
|--|---------------|---|-------|-----|
| Current Address  |               | City  | State | Zip |
| Phone Number   | Mobile Number | Email Address   |       |     |
| Are you legally authorization to perform services in the United States as an independent contractor?<br>Yes <input type="checkbox"/> No <input type="checkbox"/> |               | If selected to provide services as an independent contractor, are you willing to complete a background check?<br>Yes <input type="checkbox"/> No <input type="checkbox"/> |       |     |

## Position

|                                      |                            |                         |
|--------------------------------------|----------------------------|-------------------------|
| Services Offered / Scope of Services | Earliest Availability Date | Proposed Rate Structure |
|--------------------------------------|----------------------------|-------------------------|

## Education & Training

Contractors may be asked to provide proof of licenses or certifications relevant to the services offered.

| Type of School               | Name and Location of School | Number of Years Attended | Degree/Area of Study | Graduated?                   |                             |
|------------------------------|-----------------------------|--------------------------|----------------------|------------------------------|-----------------------------|
| High School or GED Institute |                             |                          |                      | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| College/University           |                             |                          |                      | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Graduate School              |                             |                          |                      | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Other/Trade School           |                             |                          |                      | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

### U.S. Military Service

Branch of Service:

Technical Specialization:

Rank Attained:

## References

| Name | Title | Company | Phone |
|------|-------|---------|-------|
|      |       |         |       |
|      |       |         |       |
|      |       |         |       |

## Business & Contract Experience

Starting with your current or most recent experience including U.S. Military Service. Please include at least the last 7 years.

|  |          |        |
|--|----------|--------|
| <b>Client / Company Name (1)</b>   | Address: | Dates: |
| Role / Services Provided:  | Phone:   |        |
|  |          |        |
| Summary of duties: include any special training/skills/qualifications you needed to perform this job |          |        |

|  |          |        |
|--|----------|--------|
| <b>Client / Company Name (2)</b>   | Address: | Dates: |
| Role / Services Provided:  | Phone:   |        |
|  |          |        |
| Summary of duties: include any special training/skills/qualifications you needed to perform this job |          |        |

|  |          |        |
|--|----------|--------|
| <b>Client / Company Name (3)</b>   | Address: | Dates: |
| Role / Services Provided:  | Phone:   |        |
|  |          |        |
| Summary of duties: include any special training/skills/qualifications you needed to perform this job |          |        |

|  |          |        |
|--|----------|--------|
| <b>Client / Company Name (4)</b>   | Address: | Dates: |
| Role / Services Provided:  | Phone:   |        |
|  |          |        |
| Summary of duties: include any special training/skills/qualifications you needed to perform this job |          |        |

## Security Data Information

Please provide accurate and complete information in response to the following questions. Do not include in response to any of the questions below: arrests without convictions or incarcerations for which a record has been sealed or expunged. Please note that "yes" responses will not necessarily disqualify you, nor will a "no" response guarantee selection as an independent contractor.

| Yes   | No |   |
|---|----|---|
|   |    | Within the last seven years, have you been convicted of or pleaded guilty or nolo contendere (no contest) to a crime or other offense? Include any and all court convictions, military service convictions, deferred adjudication or guilty or nolo contendere pleas. |
|   |    | Are you currently on parole, probation, work release program, deferred adjudication, conditional release, or serving a weekend sentence as a result of a conviction or a guilty or nolo contendere (no contest) plea?   |
|   |    | In the last seven years, have you been confined (incarcerated) as a result of the sentence of any court? (Include incarcerations resulting from the sentence of a military court or similar proceeding.)  |
| If you answered "yes" to any of the above questions, please provide the following information as an attachment: list date(s), offense(s), and disposition(s). |    |   |

## Signature Disclaimer

I understand that submission of this application does not create an employment relationship. If selected, I may be engaged as an **independent contractor**, not as an employee.

I understand that:

- I am responsible for my own taxes, insurance, and licenses.
- I will not be eligible for employee benefits
- Any engagement will be governed by a separate **Independent Contractor Agreement**
- Either party may decline to enter into an agreement at any time prior to execution

I certify that the information provided is true and accurate.

I understand I am applying to provide services as an independent contractor (1099), not as an employee.

|                     |           |
|---------------------|-----------|
| Name (Please Print) | Signature |
| Date                |           |