



Employee or Independent Contractor Classification

This form is to be used for any U.S. vendor who is an individual or sole proprietor or a company without a separate federal identification number for tax purposes. The information provided below will assist the University in determining whether the worker will be classified as an independent contractor or as an employee of the University. These questions are intended as a guide in making the classification. Due to the serious tax consequences for both the University and the worker, it is important for a University employee who is responsible for hiring or retaining the worker to complete this form and forward to Finance for review. If the worker is classified as an independent contractor, Finance will notify the department and Purchasing. Otherwise, the form will be forwarded to Human Resources.

1.	Relationship Factors	Yes	No
A.	Does the worker currently provide services for the University in any capacity? If "Yes", explain:	<input type="checkbox"/>	<input type="checkbox"/>
B.	Has the worker ever provided the same or similar services to the University in the past? If "Yes," explain:	<input type="checkbox"/>	<input type="checkbox"/>
C.	Is it expected that the University will offer employment to the worker upon the completion of services?	<input type="checkbox"/>	<input type="checkbox"/>
D.	Is there an ongoing relationship between the University and the worker (or does the worker perform a particular job only)?	<input type="checkbox"/>	<input type="checkbox"/>
E.	Is any other person currently performing essentially the same duties that are to be performed by the worker?	<input type="checkbox"/>	<input type="checkbox"/>
F.	Does the worker provide services only to the University and not advertise services to others as part of his/her business?	<input type="checkbox"/>	<input type="checkbox"/>
G.	Does the University provide training or other instruction to the worker? If "Yes," explain:	<input type="checkbox"/>	<input type="checkbox"/>
H.	Is the work performed under a written agreement that has been reviewed by the Office of General Counsel? If "Yes," please provide a copy of the agreement.	<input type="checkbox"/>	<input type="checkbox"/>
I.	Briefly describe the services to be performed by the worker and provide the worker's job title, if any.		

2.	Classification Guidelines	<i>Complete section A, B or C depending on the services performed by the worker.</i>		Yes	No
A. Teacher/Lecturer/Instructor					
1.	Is the worker an invited guest lecturer?	<input type="checkbox"/>	<input type="checkbox"/>		
2.	Is this the first instance the worker has performed these services for the University within the last 12 months? If "No," explain:	<input type="checkbox"/>	<input type="checkbox"/>		
3.	Does the University have control over which course materials will be used during the instructional duties?	<input type="checkbox"/>	<input type="checkbox"/>		
4.	Is the worker teaching a course for which students will receive a credit toward an RWU degree?	<input type="checkbox"/>	<input type="checkbox"/>		
5.	What is the worker's teaching schedule (i.e., number of days, hours, classes)?				
B. Researcher					
1.	Will the worker perform research under the supervision of a University employee?	<input type="checkbox"/>	<input type="checkbox"/>		
2.	Will the worker serve in an advisory or consulting capacity with a University employee in a collaborative agreement?	<input type="checkbox"/>	<input type="checkbox"/>		
C. Other Classification					
1.	Does the University have the right to control how, when, and where the work is to be done rather than rely on the worker's expertise?	<input type="checkbox"/>	<input type="checkbox"/>		
2.	Does the University determine the work schedule for the worker as opposed to allowing the worker the freedom to establish his/her own hours?	<input type="checkbox"/>	<input type="checkbox"/>		
3.	Will the worker provide his/her own tools and equipment and not rely on the University to supply the necessary tools and equipment to perform the services?	<input type="checkbox"/>	<input type="checkbox"/>		
4.	Will the University provide the worker with specific training and/or instruction?	<input type="checkbox"/>	<input type="checkbox"/>		

If the worker is determined to be an independent contractor, please have him/her furnish a completed IRS Form W-9 and a copy of his/her worker's compensation coverage.

Completed by: _____ Date: _____

(Please print)

Determination: _____ Approval: _____