

## **Independent Contractor Questionnaire**

Purpose: If you are considering hiring an Independent Contractor (IC), please complete this questionnaire to guide HR in its decision making. An IC is normally engaged in an established business, trade, or profession and is an individual or sole proprietor at a Single Member Limited Liability Company (LLC) who is contracted to work utilizing their own methods, and the means by which the work is accomplished is not controlled by the University of Richmond. As such, an IC is not an employee of UR and is treated differently with respect to tax withholdings, employee benefits, and payment methods. Approval must be obtained prior to engaging services and executing a contract.

Independent Contractor:	Doing Business As (DB	A):
Permanent Tax Address:		
City:	State:	Zip Code:
Describe the services being provided:		
Is the Independent Contractor a current or former employee of UR?	Yes No	
if yes, complete the following information.	Last date worked at UR	
Department:	Title:	
Brief job description:		
Will UR be providing direction about when, where, or how the wo     Yes No	rk is conducted?	
2. Does the worker offer his or her services to the general public?  Yes No		
2a. If yes, is the worker able to provide services to other clients d	luring the same period th	at the worker is contracted with UR?
3. Can the worker experience a profit or a loss from providing their services. Yes No	ervices?	
3a. Does the worker have employees or subcontractors assisting very season. Yes No	with this work?	
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4. What is the duration for this project?		
Short-term ( $\leq$ 3 mos.) Long-term ( $\geq$ 3 mos.)	On-going I	roject-based
5. How will UR compensate the worker? Check all that apply.		
Hourly Rate Daily Rate Monthly Rate	Fixed fee for delivera	bles Fixed fee per project
6. Will the worker be providing services that are normally performed (Example: are you hiring something to teach credit courses or to perform the services of the performance of the services of the performance of the services of the performance of the services of the ser		•



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Does UR have a Yes	No		
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/a. If yes, plea	se summarize the i	nature and frequency any prior contracts	and/or prior employment.
7h Has this w	orker served as an l	Independent Contractor for UR within the	e last 12 months?
Yes		independent confidence for off within the	Tust 12 months.
		vorking relationship with the worker?	
Yes	No	volking relationship with the worker?	
ditional Inform	ation / Comments	(Please reference question number from	above).
		Form Completed	By
		Form Completed	By
narer Name			
parer Name		Form Completed Preparer Phone Number	By  Preparer Email Address
		Preparer Phone Number	
parer Name parer Signature	,		
	Internal Use Onl	Preparer Phone Number  Date	
		Preparer Phone Number  Date	Preparer Email Address
	Internal Use Onl	Preparer Phone Number  Date	