

INDEPENDENT CONTRACTOR REQUEST

Review and submit completed form to Brian Cotham, Director of Procurement, at bcotham@csufresno.edu. If you don't have scanning capability, campus mail the request to Procurement, ATTN: Brian Cotham, JA111. **Please see Independent Contractor Request Procedures for more information.**

*****ALL REQUESTS MUST BE APPROVED BY HUMAN RESOURCES PRIOR TO WORK PERFORMED ON CAMPUS *****

1. PROPOSED INDEPENDENT CONTRACTOR INFORMATION

Name: _____

(If applicable) Business Name: _____

Street Address: _____ City & State: _____

Contact Information (Phone/Email): _____

Check one: Sole Proprietorship Partnership Corporation LLC Other

Is the Independent Contractor Licensed? Yes No If Yes, list license type: _____

2. DEPARTMENT REQUEST DETAILS

Department: _____

Requested By (Name/Title): _____

Date Range: _____ Payment Amount Requested: _____ Charge to Department ID: _____

3. DESCRIPTION OF SERVICES/JUSTIFICATION

Please provide details outlining the proposed services:

4. ADMINISTRATOR REVIEW & AUTHORIZATION (Must be signed by the Appropriate Administrator)

I hereby declare that the information provided in this document is true and correct and that I have sufficient knowledge of, authority, and responsibility for the work to be performed under this contract to effectively make this certification.

Requestor Name: _____ Signature: _____ Date: _____

Appropriate Administrator Name/Title: _____

Appropriate Administrator Signature: _____ Date: _____

5. QUESTIONNAIRE

The following questionnaire is to be completed by the Requestor and will be used by Human Resources to determine if the work can be conducted by an Independent Contractor.

YES	NO	
<input type="radio"/>	<input type="radio"/>	1. Will the worker be required to comply with university provided instructions about when, where, and how to work?
<input type="radio"/>	<input type="radio"/>	2. Will the worker be provided with instructions/training by the university regarding the particular method or manner by which the work will be performed?
<input type="radio"/>	<input type="radio"/>	3. Is the work to be performed a regular part of university business/work?
<input type="radio"/>	<input type="radio"/>	4. Does your department or another department on campus have employees performing the same, or similar, functions?
<input type="radio"/>	<input type="radio"/>	5. Will the worker be required to perform the work himself or herself?
<input type="radio"/>	<input type="radio"/>	6. Will the worker be hiring or supervising university employees?
<input type="radio"/>	<input type="radio"/>	7. Will the worker and the university have a continuing relationship, meaning that the period of service will not be performed in a finite time frame?
<input type="radio"/>	<input type="radio"/>	8. Can the worker terminate his/her relationship without incurring a liability for failure to complete the job?
<input type="radio"/>	<input type="radio"/>	9. Will the worker be able to hire and pay his/her own assistants?
<input type="radio"/>	<input type="radio"/>	10. Does the worker offer similar services to others as part of his/her own business?
<input type="radio"/>	<input type="radio"/>	11. Will the worker be allowed to work concurrently for other organizations/clients while working for the university?
<input type="radio"/>	<input type="radio"/>	12. Will the worker be able to determine his/her own hours and priorities?
<input type="radio"/>	<input type="radio"/>	13. Will the worker be hired and paid to complete one specific job/project for the university?
<input type="radio"/>	<input type="radio"/>	14. Will the worker realize a profit or loss as a result of his/her services?
<input type="radio"/>	<input type="radio"/>	15. Will the worker provide his/her own tools or materials?
<input type="radio"/>	<input type="radio"/>	16. Did the worker retire/separate from the CSU fewer than 2 (two) years ago?
<input type="radio"/>	<input type="radio"/>	17. Was an employee in a policy making position or an MPP?
<input type="radio"/>	<input type="radio"/>	18. Will the worker participate in the process of planning, negotiations, transaction, or any part of the decision making process?
<input type="radio"/>	<input type="radio"/>	19. Will the worker's position be funded by a CSU contract?
<input type="radio"/>	<input type="radio"/>	20. Will the worker be responsible for supervision of CSU contracted employees?
<input type="radio"/>	<input type="radio"/>	21. Is the worker free from control and direction of the public agency in the performance of work?
<input type="radio"/>	<input type="radio"/>	22. Does the worker perform work that is outside the usual course of public agencies business?
<input type="radio"/>	<input type="radio"/>	23. Is the worker customarily engaged in independently establish trade, occupation or business of the same nature as the work performed for the public agency?

Human Resources/Procurement Use Only

Human Resources Approval

Is the proposed IC an existing employee of the CSU or State Agency? Yes No

IC Request: Approved Not Approved

Comments/Note:

HR Reviewer Signature & Date

Date to Procurement

Procurement Processing

The following documents have been collected:

- Requisition/PO
- Independent Contractor Agreement/Scope of Work
- Proof of Insurance (including Certificate of Insurance with Additional Insured Endorsement)
- Proof of Background Check (If required)
- Proof of Residency
- Vendor Data Record Form (STD 204)

Procurement Reviewer Signature & Date