

## Independent Contractor Agreement

For individuals NOT employed by VCU

**Independent Contractor:** An entity or individual who has entered into a contractual agreement to provide goods or services to the University, and meets the following criteria:

- Is not currently an employee of the University
- Has no expectation of becoming an employee at the end of contractual service
- Relied or will rely upon own expertise rather than following specific instructions from the department regarding performance of the required work
- Performed the work to the specifications of, but not under the direction of, a University employee or student
- Did not have the required number of work hours and/or days of the week set by the University.

### Independent Contractor

**PO#:**

|  |  |       |          |
|--|--|-------|----------|
| NAME:  | SSN (required for tax purposes) or Banner ID |       |          |
| P.O. BOX AND/OR STREET ADDRESS:  | City   | State | Zip code |
| Phone number and/or email address  |  |       |          |
| Were you previously, or are you currently, employed by VCU as an employee? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, date last worked _____ .<br>(If current VCU employee, do not use this form. Department requesting services should contact HR for guidance)<br>If you retired from State service within the past 30 days, you cannot serve as an Independent Contractor at this time.<br>Do you have other Independent Contractor clients? YES <input type="checkbox"/> NO <input type="checkbox"/><br>Non-Resident Alien: YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, see Global Education Office website at <a href="http://www.global.vcu.edu/students/immigration/visitor/">http://www.global.vcu.edu/students/immigration/visitor/</a> for detailed instructions and required forms prior to making any commitment to the above individual. |  |       |          |

### Department User of Service

|                    |  |  |  |
|--------------------|--|--|--|
| SCHOOL/DEPARTMENT: | <b>Payments that require special handling must be submitted to your business office 5 business days in advance of payment needs.</b> |  |  |
| CONTACT PERSON:    | PHONE #:   |  |  |

### Description of Service (Description must be detailed. Do not use acronyms. Attach additional documentation if available.)

|                       |                    |               |
|-----------------------|--------------------|---------------|
| WORK TO BE PERFORMED: |                    |               |
| DATE(S) OF SERVICE:   | AMOUNT OF PAYMENT: | Index/Account |

I understand that I will receive a 1099 for non-employee compensation if cumulative payments are \$600 or more in a calendar year and that I may be responsible for the payment of Social Security taxes.

\_\_\_\_\_  
Signature of Independent Contractor / Date

Departmental signatures: By signing, I certify that I have reviewed the Employee vs. Independent Contractor checklist and if in doubt, have contacted HR to determine that this person does not meet the criteria for an employee/employer relationship.

|   |                           |      |
|---|---------------------------|------|
| Requestor Signature   | Printed name              | Date |
| Department Approver   | Printed name/Phone Number | Date |
| Authorized Approver<br>(Required for amounts exceeding \$2,000) | Printed name              | Date |

- For payments up to \$10,000, complete this form (referencing the Purchase Order number) and send it to **Accounts Payable at P. O. Box 980327** upon completion of the service.
- For payments exceeding \$10,000, complete this form (referencing the requisition number) and send it to the assigned buyer in **University Purchasing**, prior to commencement of work. The amount of payment must reflect the total amount for all services to be provided. For example, if the individual will be paid \$2,500/quarter the amount of payment is \$10,000. Upon completion of any portion of the services for which payment is due, submit the form to Accounts Payable indicating the amount to be paid and referencing the purchase order number.
- **This form is invalid without a Purchase Order that incorporates VCU terms and conditions.**

**Questions regarding application of these guidelines may be directed as follows:**

- Questions of whether a service provider should be paid through VCU Payroll Services as an employee or through a PSA should be addressed to the department's Human Resource Generalist at [hrgen@vcu.edu](mailto:hrgen@vcu.edu) or 827-1770.
- Questions of how to use this form and issues regarding payments to Accounts Payable at 828-1077.
- Questions about the competitive procurement process and other issues related to procurements exceeding \$10,000 should be addressed to University Purchasing at 828-5954.