



UMPQUA COMMUNITY COLLEGE
Independent Contractor Checklist

INSTRUCTIONS FOR COMPLETING CHECKLIST

Prior to engagement, the responsible UCC staff will complete the checklist to help ensure that the individual is correctly classified as either an employee or an independent contractor. The department will retain a copy of the completed checklist and forward the original with the personal service contract to VP of Administrative Services / President for signature.

SECTION A: INDIVIDUAL'S CONTACT INFORMATION

First name \_\_\_\_\_ Last Name \_\_\_\_\_
Address \_\_\_\_\_
Federal Id#: \_\_\_\_\_ Telephone \_\_\_\_\_

SECTION B: RELATIONSHIP WITH THE COLLEGE

- B.1 Is the individual currently working for the college as an employee or has the individual worked for the college as an employee within the current calendar year?
B.2 Does the individual have a continuing relationship with the college and perform work on reoccurring or ongoing basis?
B.3 Will the individual be required to devote essentially full-time hours to perform services for the college preventing the individual from providing services to other clients during the contract period?
B.4 Will the individual be expected to or required to perform full-time work hours at the college or facilities operated by the college?
B.5 Will the individual be expected to comply with instructions or directions from college staff to where, how, and when the work is to be performed?
B.6 Is the individual required to receive training from college staff to enable the individual to perform the work?
B.7 Will the college be responsible for hiring, supervising, and compensating workers who will substantially assist the individual performing the requested services?
B.8 Will the individual be paid for services based on an hourly, weekly, or monthly basis?
B.9 Will the college provide a significant amount of tools, equipment, or materials needed by the individual to perform the services?
B.10 Will the individual be subject to termination by the college for reasons other than non-performance of the service agreement?
B.11 Can the individual terminate the service agreement with the college without incurring any liability for a failure to perform services?

**SECTION C: EVIDENCE OF CONTRACTOR'S BUSINESS OPERATION**

**YES      NO**

C.1 Does the individual perform work ( or could perform work) at an office, facility or location off campus that is maintained at the individual's expense?

C.2 Does the individual provide services to other businesses as an independent contractor?

C.3 Does the individual possess the appropriate licenses, certifications and insurance?

C.4 Is the individual paid for the end product?

C.5 Are travel expenses included in the price of the contract?

**SECTION D: CLASSIFICATION OUTCOME**

**IF:** All questions in Section B = NO  
All questions in Section C = YES      **THEN: the individual is classified as an independent contractor**

**A W-9 is Attached**

**IF:** All questions in Section B = YES  
All questions in Section C = NO      **THEN: the individual is classified as an employee**

**SECTION D: CLASSIFICATION OUTCOME DISAGREEMENT**

This section is to be completed if the department requesting an individual's services disagrees with the checklist's outcome. Send the completed checklist along with an explanation as to why the department believes the individual should be classified differently than the classification outcome identified in Section D. The Finance Office will review the explanation with the Human Resources Department to determine the correct classification. A final determination will be provided to the department within 5 business days.

**Explanation:**

**SECTION F: SIGNATURE OF UCC STAFF COMPLETING CHECKLIST**

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Department