

# INDEPENDENT CONTRACTOR PRE-SELECTION CHECKLIST

Information About Individual:			
Name:	Name of Company:		
Indicate whether individual or individual's company is a:	Sole Proprietorship	Partnership	Corporation
Business License No.	Professional License No.		
Professional Designation (if any):			

- A Is this individual currently employed by CPC or the CSU system? Yes      No  
 If yes, indicate name of employer and department:  
**If you checked yes to item A above, do not complete this worksheet. The individual will need to be hired as a CPC employee.**
- B Was the individual employed with either CPC or the CSU system at any time during the past 18 months? Yes      No  
 If yes, did the individual provide services as an employee that are either the same or similar to what he or she will provide as an independent contractor? Yes      No
- C Does this individual have any kind of relationship with the project/project personnel that may create a conflict of interest? Yes      No
- D Briefly describe the services that are to be performed by the individual or the individual's company:
- E Is this the same type of work that employees of either CPSU or CPC perform? Yes      No

IRS Common Law Factors			
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| 1 | Will the project director provide instructions to individual on how to perform services or supervise the individual during performance of the services?<br>If yes, please describe the type and frequency of the instructions:         | Yes | No |
| 2 | Will the individual receive training from the project director?<br>If yes, please indicate the amount of training using a scale of 1 to 10 ("1" being the least amount of training and "10" being the most amount of training) Rating: | Yes | No |
| 3 | Will the individual be required to perform services on CPSU, CPC, or CSU premises?   | Yes | No |
| 4 | Will the individual be permitted to assign their own staff without obtaining CPC prior approval and pay them directly?   | Yes | No |
| 5 | Will CPC specify the individual's work hours?  | Yes | No |
| 6 | Will the individual be required to work full time?   | Yes | No |
| 7 | Will the individual be required to attend staff meetings?<br>If yes, please define the role of the individual:   | Yes | No |

8	Will the individual be required to submit regular written or oral reports? If yes, please define the nature of reporting:	Yes	No
9	Will the project director pay for or reimburse expenses incurred by the individual or the individual's employees? If yes, please describe the type (e.g., travel, parking) and estimated amount of expenses:	Yes	No
10	Has the individual made a significant investment in tools, equipment, or facilities that will be used for this project?	Yes	No
11	Will the individual make their services available only to CPC during this project?	Yes	No
12	Does the individual advertise and hold itself out to the public as available to provide the same or similar services?	Yes	No
13	Is the individual engaged in a distinct business or occupation that is separate from CPSU and CPC?	Yes	No
14	Will the individual negotiate the fee amount to be charged to CPC?	Yes	No
15	Are the services to be performed part of the regular services or business of the project/department?	Yes	No
16	Will the individual receive any employee benefits including insurance coverage, sick pay, vacation pay, etc?	Yes	No
17	Do the services require a specific skill and high degree of expertise? If yes, please describe the skill (s) in detail:	Yes	No
18	Will the services be rendered for a specific project with a specified beginning and ending date?	Yes	No

Prepared by:	Org key:	Tel No	Date
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**Review and Evaluation of Checklist (this section completed by Sponsored Programs)**

What supports employee status?

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What supports independent contractor status?

**Recommendation**

Recommend hiring individual as an employee?	Yes	No
Recommend engaging individual as independent contractor	Yes	No

Reviewed by: (SP analyst)	Date:
Approved by: (CPC)	Date: