

Questionnaire – Determination of Independent Contractor Status

This questionnaire is intended to provide guidance in assessing an individual/entity's status with the University and must be filled out and submitted by the hiring supervisor prior to engagement.

The University reserves the right to treat the individual as an employee based on the answers to this questionnaire. If the individual/entity being engaged is not dealing with the hiring supervisor at arm's length, as determined in accordance with the Income Tax Act, they will not be considered an independent contractor.

If it is determined that the individual/entity is an independent contract, they will be required to sign the **Confirmation of Information and Indemnification Agreement** as they will not be covered by the University's liability insurance. The Indemnification Agreement must be submitted to the Business Office with this questionnaire.

Note: Honorarium payments greater than \$500 is considered a fee for service. This questionnaire must be filled out in such circumstances.

Name of Individual/Entity: _____

Department/Research Project: _____ **FUND:** _____ **ORGN:** _____

Brief Description of Work to be performed:

Determinations	Yes	No
Is the individual a current employee or faculty member of the University?	<input type="checkbox"/>	<input type="checkbox"/>
Is the entity owner or controlled by an employee or faculty member of the University?	<input type="checkbox"/>	<input type="checkbox"/>
Will the individual/entity be provided with one or more of the following: training, supervision, evaluations, or direction as to the expected outcome or specific results, etc.?	<input type="checkbox"/>	<input type="checkbox"/>
Will the engagement be for an ongoing relationship rather than a specific job?	<input type="checkbox"/>	<input type="checkbox"/>
Will the individual/entity be provided with one or more of the following: computers, tools, telephone, office supplies, shipping costs, rental of equipment, etc.?	<input type="checkbox"/>	<input type="checkbox"/>
Is the individual/entity precluded from making a profit or incurring a loss?	<input type="checkbox"/>	<input type="checkbox"/>
Is the individual related to the hiring supervisor? (As per the Income Tax S1-F5-C1, a related person is connected by blood, marriage, common-law partnership or adoption.)	<input type="checkbox"/>	<input type="checkbox"/>
Do the parties have mutual, non-economical interest with respect to the work being performed (for example, a student working for their supervising faculty member)?	<input type="checkbox"/>	<input type="checkbox"/>
Will the hiring supervisor be responsible for management and planning of the work? This may include, but is not limited to: establishing work location, days and hours of work, vacations, etc.	<input type="checkbox"/>	<input type="checkbox"/>
Will the individual be provided with University facilities, such as an office or laboratory space?	<input type="checkbox"/>	<input type="checkbox"/>
If additional human resources are required, will the hiring, supervision and remuneration be the responsibility of the University?	<input type="checkbox"/>	<input type="checkbox"/>

Signature of Hiring Supervisor

Date

Name of Hiring Supervisor (please print)

Campus Extension

Please submit the completed form along with the Independent Contractor Indemnification Agreement to the Business Office, 301 Robertson Hall

BO Approval