

UNIVERSITY OF MINNESOTA

CONTRACTS FOR PROFESSIONAL SERVICES (CFPS) WORKSHEET REFERENCE SHEET

Form Purpose:

This Worksheet is a tool to help departments determine whether a contractual relationship for services might represent an employee/employer relationship.

If the answer to any of these questions is yes, you may need to consider hiring the individual as an employee. Completing the worksheet assists in making a decision to hire an individual as an employee or as an independent contractor.

<u>FORM FIELDS</u>	<u>FIELD DEFINITIONS</u>
Social Security Number:	This is the social security number for the contractor. Generally, this is available when contracting with an individual. Although this information is necessary when processing forms, it is important to treat the social security number as confidential information.
Payee Name:	These fields identify the contractor being considered for the contract. It is important to identify countries for any individuals that are not U.S. citizens.
Contract/PVC Number:	Fill in Contract for Professional Services number or PVC number if contract is not used.
If Foreign National - Visa Status:	Contact contractor for this information if work is being done in the U.S.
Country:	This identifies the country of origin for the person being considered for contract.
Total Consideration:	This identifies the total amount of money committed to this contract.
Please provide a description of services provided by contractor:	This identifies the scope of work, contractor's duties and deliverable items included in the contract.
Indicate Time Period:	This identifies the beginning and ending dates for this contract. Contract cannot begin prior to all necessary approvals.
Yes/No Questions	This list of questions is used to determine whether a person doing the identified services should be considered an employee or a contractor.
Signature/Date:	This identifies the person completing the form and date of signature.
Dept Contact/Phone/Date	This identifies the person to call if there are questions regarding the form.

Department Name/Address:	This identifies the name and address of the submitting area.
ROUTING:	Complete this form whenever contracting with an individual or sole proprietorship and route to Central Payroll with the Contract for Professional Services form or PVC.