



INDEPENDENT CONTRACTOR PROCESS

Steps to follow

SAMPLE SCENARIO

- In this scenario, you are George Washington and you work for the VSU department “GOVT.” You need to get an independent contractor (Abraham Lincoln) approved to be a guest lecturer as part of your department’s yearly lecture series “How to Fill Out Forms.” Abraham will be speaking on 12/02/2022. You are filling out the forms on 11/01/2022 in order to have time for processing (**the forms must be submitted a *minimum* of 30 days before the service date**). All the sections that you fill out will be highlighted on the sample forms so you can see where you would enter the information.

DETERMINATION
OF STATUS FORM
(DOS)
SECTION 1

Instructions: Requesting Departments must receive approval from Human Resources BEFORE work is started by an individual. Once this form is processed, a representative from Human Resources will contact you with further directions. Keep in mind that the individual MUST pass a background check for HR to approve eligibility. Please send the completed form to vsuindependentcontractor@valdosta.edu for review.

I. Abraham Lincoln GOVT George Washington 000-000-0000
Individual's Legal Name Requesting Department Form Preparer Preparer Phone Number

- List the independent contractor, the requesting department, and the form preparer along with their phone number
- Put the LEGAL NAME so it will match the background check/vendor invite.

SECTION 2 OF THE DOS FORM

II. Multiple Relationships with the University (must be verified with the individual)

- | | YES | NO |
|--|--------------------------|-------------------------------------|
| 1. Does the individual currently work for VSU as an employee? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Does the individual currently work for another OneUSG institution as an employee? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Has the individual worked as an employee (including either temporarily or as a student assistant) at a OneUSG institution (including VSU) in the same calendar year (Jan-Dec) as the date of service? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. Is it currently expected that VSU will hire this individual as an employee immediately following the termination of a personal service agreement? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Is the individual a current student at VSU, or will they be a student at the time of service? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. Is the individual retired from a Georgia Teachers/Employees' Retirement System (TRS/ERS) affiliate (Georgia state government/agency, school system, College/University)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

If the answer to any of the above questions is "Yes," DO NOT USE THIS FORM. Contact HR to determine the correct form needed.
If the answer to all questions is "No," proceed to Section III.

Fill out Abraham's relationship status with VSU/OneUSG:

If Abraham falls under any of these criteria check yes for the box in section 2:

- If he is currently working for VSU/OneUSG
- If he has worked as an employee for VSU/OneUSG in the same calendar year as the date of service of this contract
- If he will be hired by VSU after his contract is up
- If he is retired from TRS/ERS GA affiliate
- If he is a student or will be a student at the time of service

*Abraham is a self-employed freelance lecturer who has never worked for a GA retirement affiliate and is not a student so you would check **No** for all boxes*

SECTION 3 OF THE DOS FORM

III. Classification (choose A or B)

A. Teacher/Lecturer/Instructor/Speaker

1. Is the individual a "guest lecturer" (e.g. an individual who lectures only a few sessions)?

YES NO

If the answer is "Yes," proceed to Section IV.

If the answer is "No," proceed answer questions 2 and 3.

2. Is the individual teaching a course for which students will NOT receive credit toward a degree?

3. Does the individual provide the same or similar services to other entities or the general public as part of a trade or business?

If the answer to both questions 2 and 3 is "Yes," proceed to section IV. If the answer to either 2 or 3 is "No," answer question 4.

4. In performing instructional duties, will the individual primarily use course materials that are created or selected by the individual?

If the answer is "Yes," proceed to Section IV.

If the answer is "No," DO NOT USE THIS FORM.

B. Miscellaneous Individual

YES NO

1. Does this individual provide the same or similar services to other entities or to the general public as part of a trade or business?

If the answer is "Yes," proceed to Section IV.

If the answer is "No," answer question 2.

2. Will the department establish project goals, direct the work, provide specific instructions and/or serve in a supervisory capacity regarding the performance of the required work?

If the answer is "Yes," DO NOT USE THIS FORM.

If the answer is "No," answer question 3.

3. Will the University set the number of hours and/or days of the week that the individual is required to work, as opposed to allowing the individual to set their own work schedule?

If the answer is "Yes," DO NOT USE THIS FORM.

If the answer is "No," proceed to Section IV.

- Determine Abraham's classification. He is a freelance guest lecturer, so select *only* Section A Teacher/Lecturer/Instructor/Speaker.
- Check Yes for question 1 since he only lectures for one/a few sessions.
- Skip all the other questions in Section 3 and leave them blank since they do not apply (and skip Section B as well).

SECTION 4 OF THE DOS FORM

IV. Additional Questions (please answer all)

1. Will the position be involved with minors (under the age of 18)?
2. Are these minors non-VSU students? **If "Yes," it is mandatory that you contact Minors on Campus. If N/A, select "No."**
3. Are these minors categorized as students of VSU (academically enrolled at VSU)? **If N/A, select "No."**

YES NO

1.

2.

3.

- Answer the additional questions.
- There are **no minors involved** in the yearly lecture series which is a public event, so check **No** for every box.

SECTION 5 OF THE DOS FORM

V. Signatures

Alexander Hamilton

Budget Manager Name Print

A Hamilton

Signature

11/01/2022

Date

HR/Procurement Name Print

Signature

Date

- Have your Budget Manager (Alexander Hamilton) approve and sign the form before submitting it to HR.
- Leave the bottom boxes blank for HR to process/sign.

MONETARY SERVICE AGREEMENT FORM

A. Supplier's Full Legal Name	Abraham Lincoln	F. Service Start Date	12/02/2022
B. Supplier Email	alincoln@gmail.com	G. Service End Date	12/02/2022
C. Supplier Contact Phone	111-111-1111	H. Service Fee	\$ 250.00

- If you have any questions on how to fill out the MSA form, please contact **Procurement** at **229-333-5708** since this is their form. The MSA form *must be filled out* before it is sent to HR.
- Fill out the top section with the supplier's (Abraham Lincoln) information, the service dates, and the service fee. *The e-mail on this form is the e-mail used for the background check, so please make sure it is correct.* Abraham will only be working one day (02/02/2022), and he will be paid one set fee (\$250) for the day

PART 2 OF THE MSA FORM

PART 2: DEPARTMENT INFORMATION

A. End User Department	GOVT
B. Budget Manager Name	Alexander Hamilton
C. Primary Contact Name	George Washington
D: Primary Contact Email	gWASHINGTON@valdosta.edu
E. Project Manager Phone	222-222-2222
F. VSU Budget Chart String	10000-0000000-11100-11000

- Fill in your department's (GOVT) information. The primary contact person is the person who filled out the form and is contracting Abraham (George Washington). When filling out the form electronically you ***must have auto resize text activated*** or the form will cut off your budget string and Procurement will not be able to read it.
- In Adobe, this feature is under Tools→ Forms & Signatures→ Prepare Form. Then right-click the text field and select Properties→ Appearance→ Font Size→ Auto. **This only has to be done once and then this form will always auto-size whenever you download it again in the future.**

PART 3 OF THE MSA FORM

PART 3: PROJECT QUESTIONS.

Y/N

1. Is the project's initial term fully funded?	Yes
2. Does the Scope of Work fully detail the anticipated project?	Yes
3. Are all project documents attached? (SOW, Quote, etc.)	Yes
4. Is this vendor be processing credit card data on behalf of VSU?	Yes
5. Will vendor regularly interact with minors, students, employees, monies, sensitive/confidential data or facilities? (for example, an HVAC repair crew with extended access to a building for more than 5 business days)	Yes

Answer the project questions:

- The Budget Manager has approved everything
- You know what Abraham will be doing
- There are no additional documents
- Abraham will be interacting with employees because he will be answering questions, teaching, role playing, etc.
- Therefore, you select **Yes** for all five questions in Part 3.

PART 4 OF THE MSA FORM

I. Supplier will provide the following detailed Scope of Work (describe fully):

Abraham Lincoln will be a guest lecturer for GOVT on 12/02/2022 for our yearly series "How to Fill Out Forms." He will be teaching employees how to fill out forms, give demonstrations, and answer a Q&A at the end. Will be an interactive lecture with role playing scenarios.

II. VSU will:

- a. Pay Supplier the Fee for Supplier's Services Rendered in accordance with the terms and conditions of this Agreement.
- b. Provide access to those VSU facilities and/or properties reasonably necessary for Supplier to carry out Supplier's responsibilities under this Agreement.
- c. Any additional responsibilities that VSU commits to (must be approved by Procurement prior to this form being signed by either party):

N/A

V. Payment Terms: VSU will remit payment to Supplier within thirty (30) calendar days after VSU's receipt and acceptance of an undisputed invoice; unless alternate Payment Terms are expressly agreed upon below.

- a. Alternate Payment Terms (must be approved by Procurement prior to this form being signed by either party):



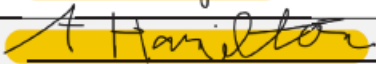
N/A

- Fill in sub-sections I, II, and V which pertain to the Scope of Work and Payment Terms. You will fill in that Abraham is a guest lecturer and detail his job duties. There is no additional payment information, so you fill in N/A for the remaining sections.

PART 5 OF THE MSA FORM

PART 5: SIGNATURES.

CERTIFICATION: By signing below, both parties attest that they are in agreement with the terms of this Agreement and all State of Georgia and VSU Terms & Conditions, and Supplier certifies that it can furnish the services and materials designated above.

Approvers	Printed Name	Signature	Date
1. Supplier:	Abraham Lincoln		11/1/22
2. Requestor:	George Washington		11/1/22
3. Budget Manager:	Alexander Hamilton		11/1/22

- Obtain the necessary signatures for the supplier (Abraham Lincoln), the requestor (George Washington), and the Budget Manager (Alexander Hamilton). *The same person cannot sign as both the requestor and the budget manager, and the budget manager listed on the MSA must be the same budget manager listed on the DOS.*

ONCE ALL
STEPS HAVE
BEEN
COMPLETED

- *You will then submit both forms to HR through the independent contractor alias e-mail vsuindependentcontractor@valdosta.edu as pdf attachments (NOT through DocuSign).*
- Forms **MUST** be submitted a **minimum of 30 days** before the contractor is scheduled to work in order to allow enough time for a background check and for processing. **This is a requirement for all independent contractors.**
- Once received, HR will initiate a background check with our vendor, Accurate. Please assist by working with your independent contractor to remind them to check their email and respond to Accurate's request for consent to perform a background check.
- After HR has approved the independent contractor, you will then receive an e-mail stating that you may now log in and submit your ePro request. **Please make sure that the supplier signs the agreement, and a PO is established prior to services being rendered.**
- Please note that a contractor **CANNOT WORK** unless **ALL** the following are completed:
 - Type equation here.**A successful background check has been completed
 - HR has approved the independent contractor
 - The supplier has signed the MSA
 - A Purchase Order is established