



INDIVIDUAL PAYMENT FOR SERVICES

The information on this form is used to support the payment request and ensure that the University complies with IRS guidelines.

ALL PAYMENTS TO NOTRE DAME STUDENTS MUST BE REQUESTED USING THE STUDENT APPLICATION FORM

Payment should be processed: With Next Normal Paycheck (preferred) Separate Check
Note: Payments to non-exempt employees must be processed with the next normal paycheck to ensure compliance with Wage and Hour Laws.

If separate check, payment routing: U.S. Mail Campus Mail Pick Up
If campus mail, address _____ If pick up, campus phone _____

Payee (Individual Providing Service) _____ U.S. Citizen or Resident Alien? _____
Yes/No

Social Security or Tax I.D. Number _____ If nonresident alien, list country/visa type _____

Payee's Mailing Address _____

Description of Services Performed _____

Approximate Number of Hours Worked _____

Is the payee currently (or were they recently) a Notre Dame faculty? _____ Administrator _____ Staff? _____
Yes/No *Yes/No* *Yes/No*

In general, all payments to Notre Dame employees will be included on their Form W-2 with applicable payroll taxes withheld. Exemptions will be made for royalty payments and other qualifying payments such as payments for book editing services.

The second page of this form must be completed for all non-employee payments.

Requested by _____ Dept. _____ Date _____

Authorized Approval _____ Date _____
Budget Unit Director

Amount to be Paid for Services \$ _____ Account Number-Services _____
Expenses to be Reimbursed \$ _____ Account Number-Expenses _____
Total Payment Due \$ _____

Reimbursed expenses must be reported and substantiated in compliance with the University Travel Policy.

SEND COMPLETED FORM TO OFFICE OF HUMAN RESOURCES

Human Resources Review _____	Payee Classification? Employee _____ IC _____
Comments _____	

Restricted Funds Audit _____	Process Code _____
General Accounting Audit _____	Accounting Address Code _____
Payroll Audit _____	W-2 1099 1042-S

FOR ACCOUNTING USE ONLY	Unsubstantiated expenses \$ _____	Code "CC"
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INDIVIDUAL PAYMENT FOR SERVICES
PAYEE QUESTIONNAIRE

This questionnaire must be completed for (by) any payee electing independent contractor status.
This questionnaire will assist Human Resources in determining if the services performed
qualify for Independent Contractor status as defined by the IRS.

Yes No

- 1. a. Is the payee an employee or student employee of the University?
If NO, proceed to question 2.
- b. or book editorial services?

If YES to 1(b), payment will be made as an independent contractor. If NO, payment will be processed through Payroll with all applicable taxes withheld. Proceed to signature line.

- 2. For non-employee payments: Is this payment for one of the following:
 - a. Royalties, where the payee owns the copyright?
 - b. Referee/athletic official/timekeeper/scorekeeper services?
 - c. Honorarium?
 - d. Book editorial services?

If YES to any of the above, skip lines 3-11 and proceed to signature line.

- 3. Has the payee performed similar services for the University before?

If YES, how many times? _____

- 4. Is it anticipated the payee will work in this capacity for ND again in the next 12 months?

If YES, how many times? _____

- 5. Is the payee required to personally perform the services (i.e., no subcontracting permitted)?
- 6. Does the payee generally perform this service only for the University, and not for the general public or other clients?
- 7. Does the University set the payee's hours of work?
- 8. Is the payment salary or hourly (versus flat fee)?
- 9. Was this task performed on University premises?
- 10. Did the University furnish the payee's tools or equipment?
- 11. Was the payee directly supervised by a Notre Dame employee?

I certify the above to be true and correct

Authorized Signature

(or Payee Signature) _____
required

Date _____

In the event the Internal Revenue Service questions the independent contractor status granted an individual, the information on this form will be used to substantiate the University's position.