**Lehigh University**  
**Confirmation of Independent Contractor Status** (See IRS Publication 15-A)

This form should be completed by the individual who will be providing professional services to Lehigh University.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Payroll Status:</strong></td>
<td></td>
</tr>
<tr>
<td>Was the person being paid through Payroll during the current or previous calendar year?</td>
<td>☐</td>
</tr>
<tr>
<td>If yes, was it for similar type of work?</td>
<td>☐</td>
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</tbody>
</table>

**Behavioral Control:**

Does the supervisor give the worker direction on:

- When and where to do the work?
- What tools and equipment to use?
- What workers to hire or assist with the work?
- Where to purchase supplies and services?
- What work must be performed?
- What order or sequence of work to follow?

Does Lehigh provide training to the worker?

**Financial Control:**

Will we be reimbursing them for business expenses beyond travel?

- Is Lehigh this person’s only client?

- Are they guaranteed a regular wage amount on monthly/bimonthly or weekly basis?

**Type of Relationship:**

Do we provide them with insurance/pension/sick pay/vacation pay? ☒

- Are the services provided related to a key aspect of our business (teaching, curriculum development, development, counseling students, etc)? ☒

Payee Signature: ____________________________ Date: _____________

University Representative Signature: __________________________ Date: _____________
Please complete the following items (if checked):

____ 1. What University department did the individual work:

________________________________________________________________________________

____ 2. What was the scope of the position:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

____ 3. Please describe in detail the work you have just completed:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

____ 4. Please complete the attached Form W-9

____ 5. Please list other clients for which you provide your services

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

____ 6. Attach a business card (if available)

____ 7. Please list website address listing your services or copy of advertisement from Telephone Book.

____ 8. Do you maintain an office? If so, please list the address below

________________________________________________________________________________