

Service Provider Questionnaire

UC Hastings College of the Law is providing this questionnaire to you as a potential vendor providing service to the college. We are asking for this information to aid in our evaluation of “independent contractor status” based on IRS guidelines. If, after the evaluation, Hastings proceeds with the procurement of your services as an independent contractor, we will ask you to complete the College’s New Vendor Form, which includes information from the IRS form W-9. The New Vendor Form is used to obtain your US Federal Tax ID Number and other information. Do not include your US Federal ID Number on this questionnaire.

RETURN THIS QUESTIONNAIRE by email or fax to: _____
(Name of Hastings Department Contact)

Email: _____ Fax: _____.

Service Provider Information:

1. Name: _____ 2. DBA: _____

3. Do you use your U.S. social security number as your business Federal ID Number? Yes ___ No ___

4. Briefly describe the nature of the services you perform:

5. Have you worked for Hastings as an employee in the last 12 months? Yes ___ No ___

6. Where do you advertise your services? Word of mouth ___ Yellow pages ___ Publications ___ Web ___
(check all that apply)

7. List publication names and your website URL, if applicable _____

8. Did you receive an IRS Form 1099 for performing services in the last year? Yes ___ No ___

9. Provide the name and contact number of your three (3) major customers, other than Hastings, during the last 12 months:

1. _____	2. _____	3. _____
_____	_____	_____
_____	_____	_____



Office of Fiscal Services – Service Provider Questionnaire

10. Identify the types of costs you incur in your business:

____ My business office is outside my home _____ My business office is in my home
____ Equipment (explain) _____
____ Payroll (# of employees) _____
____ Other (explain) _____

11. What tax returns do you file: _____ Payroll tax

_____ Sales tax. In what state(s)? _____
_____ Other (explain) _____

12. How do you bill your customers? (check all that apply)

_____ Hourly _____ Fee for project _____ Other (explain) _____

13. How much time do you expect to devote to all Hastings business in the next 12 months?

____ Less than 10% __ At least 10%, but less than 25% ___ At least 25%, but less than 50% ____ 50% or more

14. Service Provider Attestation and Certification:

- I am a citizen of the U.S. or a permanent resident (green card).

- I am currently not a Hastings student, employee, or otherwise affiliated with Hastings.

- I understand that if I accept employment at Hastings in the future, I must immediately notify the Purchasing Office and that failure to report a change in status could have consequences on either my employment or my independent contractor status.

- If Hastings hires me as an independent contractor, I understand that I am responsible for taxes, insurance coverage, and business expenses, and that I am not eligible for any employer-provided benefits.

Signature: _____ Date: _____

Name (please print): _____ Title: _____

Phone: (____) _____ Email: _____

For Hastings Internal Use Only:

Department representative reviewing form (please print) _____ Date: _____

Signature: _____ Title: _____