

Independent Contractor Agreement US National

This agreement, between	n the U	Iniversity of Was	shing	ton (UW) and				
sets out the terms and conditions by which							will be providing	
services for the followin	g progr	am:						
Program Information								
Program Name								
Term & Year								
Program Director Nam	e							
Email Address								
Contractor Informatio	n							
Name								
Citizenship Status								
Permanent Mailing Address								
Phone Number								
Email Address								
Corporate Status		Corporation		Partnership		Sole Proprietor		Not-for-profit
Dates of Service	·							
Start Date				End Date				
(100 100 / cl cl / 1 0 0 0 1)				(ma ma / al al /, m m n /)		1		



Date			

UoW 1631 (Rev. 8/11)

If the person IS NOT an invited guest speaker, please use form UoW 1632 available at http://www.washington.edu/admin/sp/office/EmployeeVs.pdf

An honorarium is an amount of money paid to a professional person for which fees are not legally or traditionally required in recognition of a special service. The individual receiving the honorarium MAY NOT be an employee of the UW. For more information on honoraria payments to foreign nationals see http://f2.washington.edu/fm/globalsupport/foreign-national-payments-tax#Paying_an_Honorarium_to_a_Foreign_National.

Honoraria payments are classified as independent contractor payments for federal and state tax purposes. Complete Section 1, Section 2, and if necessary, Section 3. ATTACH COMPLETED FORM TO THE PAYMENT DOCUMENT.

SE	ECTION ⁻	1. (GENERAL						
	me of Indiv			Department Contact Email Address	3	U.S. Taxpayer Id	dentification Number —		
	this person: ☐ a US Cit	•	•	een Card Holder)		Requisition Nu	umber (if applicable)		
De	partment N	ame	9		Campus Phon	e Number	Box Number 35		
SF	ECTION 2)	MULTIPLE RELATIONSHIPS WITH THE UN	IIVFRSITY					
] Yes □ I		Does this individual currently work for the University a						
	☐ Yes ☐ No Does the University expect to hire this individual as an employee to provide the same or similar services immediately following the of the activity for which he/she is receiving the honorarium?								
	If the answer is "Yes" to EITHER of the above questions, the individual must be classified as an EMPLOYEE and paid through the normal Payroll process.								
	If the an	swe	er is "No" to BOTH the above questions, proceed to S	section 3 below.					
SE	ECTION 3	3 F	RELATIONSHIP WITH THE UNIVERSITY						
☐ Yes ☐ No In performing instructional duties, will the individual primarily teach a course and use a curriculum established by the University, use of materials that are created or selected by a member of University Academic Personnel or other employee, or evaluate or grade studen official University of Washington academic credit?									
	If the answer to the above question is "Yes" the individual should be classified as an EMPLOYEE and paid through the normal Payroll process. University policy A.P.S. 32.3 requires such individuals to be employees. If the answer is "No" proceed below.								
	The above-referenced individual presented a lecture or performed equivalent training session as a one-time or occasional speaker. This individual is not a current employee of the University. The individual does not receive extensive instructions on how to perform his/her job, except perhaps topics to discuss. The individual does provide or could be available to perform this job at other businesses/schools. The individual does not receive benefits from the University of Washington, nor does the individual expect to receive benefits from the University and the individual agree, either in writing or orally, that the relationship is strictly that of an independent contractor relationship. I confirm that the above paragraph is true and therefore the individual is an independent contractor. If the above statement is not true, the individual should be classified as an employee.								
				Position					
		ING		i osidoti					
		Siç	gnature		Date_				

Nature of Service	wit hanafits the program location	on of where the services will be re	ndered
include details of service, not	wit benefits the program, location	of the services will be ref	idel ed
Amount for Service		USD	
	Amount	Currency Code	
Service Fees and Paym	nent Terms		
		ment policies, which state tl	nat 100% of total fees will be
made after services are	rendered by check mailed	to the permanent mailing a	address listed above.
Signature of Agreeme	nt		
8			
Independent Contracto	or Signature & Date	Program Director Signa	ature & Date