



The University of Texas at El Paso
AUTHORIZATION OF PROFESSIONAL SERVICES

Approval is requested to compensate the individual listed below for the services described:

Name: UTEP or Supplier ID:
Street Address: City, State, Zip Code:
Description of Services:

Employment Status: Have you contributed to TRS or ORP? Yes No
Are you a TRS retiree? Yes No
If UTEP Employee: Department: Disposition of Duties:
Department Head Approval: Signature: Name/Title: Date:
If Other UT System Employee: VPBA Representative (HR/Payroll) Signature: Name/Title: Date:
Proposed Payment: Total Fees: Transportation: Other (Specify):
Estimated Total: Rate (Hourly or Daily):
Period of Service: Cost Center:
Requesting Department: Prepared by: Email: Phone:

Nepotism Statement: Name, relationship, title, and department of any University employee or regent who is related to the above individual.

Approvals: The services provided by this individual are (1) essential and cannot be provided by available UTEP personnel, (2) a selection process based on expertise and ability has been employed and this is the most qualified individual available, (3) the fee is reasonable considering the nature and extent of the services required, and (4) proper documentation is on file to support these standards.

Chair Person/Director/PI Printed Name Title Date
Dean/Vice President Printed Name Date

TO BE COMPLETED BY INDIVIDUAL PERFORMING THE SERVICE:

NON-EMPLOYEE TRAVEL REIMBURSEMENT STATEMENT OF INTENT: With respect to travel expenses to be reimbursed under this authorization, it is my intent to:
Not provide an accounting of expenses. All amounts will be reported as non-employee compensation on IRS form 1099.
Provide an accounting for all expenses, and include required original receipts. I understand that amounts not adequately accounted for may be reported as non-employee compensation on IRS form 1099.

I have performed the above services for the University of Texas at El Paso during the period to .

Signature Printed Name Date

Grant or Contract Certifications (if applicable): The requested services are essential and (1) cannot be performed by persons receiving salary support under this grant/contract; (2) the selection process insured selection of the most qualified individual available; (3) the fee is appropriate; (4) the individual is not an employee of the University; and (5) the proper documentation is on file in the support of the above.

Principal Investigator For Office of Sponsered Projects or Contracts/Grants Accounting

*NOTE: University employees must perform work completely outside the scope of their normal job duties in order to receive this supplemental payment. Route original to Payroll, University Towers, 1900 Oregon Street, Suite 520, El Paso, Texas 79902.

Contractor Classification Checklist Employee/Independent Contractor

The information provided below will assist the University in determining whether the individual performing the services will be classified as an independent employee of the University. These questions are intended as a guide in making this classification. Further evaluation may be requested based on specific individual circumstances.

Section I Relationship with the University

- | | YES | NO |
|---|-----|----|
| A. Does this individual currently work for the University as an employee? | | |
| B. Has an offer of employment been extended to this individual? | | |
| C. Did this individual work as an employee of the University during the 12 months prior to the date of this contract? | | |

If the answer is "No" to all questions, proceed to Section II.

If the answer is "Yes" to any of the questions, the individual should be classified as an employee and paid via payroll.

Section II Classification Guidelines (Complete only section A,B, or C depending on the services performed by the individual)

- | | YES | NO |
|---|-----|----|
| A. Guest Speaker/Continuing Education Instructor | | |

1. Will the University provide course materials and tools?
2. Will the University reimburse the individuals for course related expenses?

If the answers to questions 1 and 2 are "Yes", treat the individual as an employee. If the answer to either is "No", proceed to 3 & 4

3. Is the individual an invited guest speaker to lecture in a seminar, colloquium, class, etc.?
4. Has the individual been engaged by the University fewer than 5 times in the past 12 months?

If the answers to questions 3 and 4 are "Yes", treat the individual as an independent contractor. If the answer to either question is "No", proceed to question 5.

5. Has the individual provided the same or similar services to other unrelated entities in the last 12 months?
6. Will the department provide the individual with specific instructions regarding performance of the required work rather than rely on the individual's expertise?

If the answer to 5 is "Yes" and 6 is "No", treat the individual as an independent contractor. If the answer to 6 is "Yes", then treat the individual as an employee.

- | | YES | NO |
|----------------------|-----|----|
| B. Researcher | | |

1. Will the individual perform research under the supervision of a University professor or employee?

If the answer to question 1 is "Yes", treat the individual as an employee. If the answer is "No," proceed to 2, 3, & 4.

2. Will the individual serve in an advisory or consulting capacity with a University professor or employee?
3. Has the individual provided the same or similar services to other unrelated entities in the last 12 months?
4. Will the period of service be completed within 30 days?

If the answer to questions 2, 3, and 4 is "Yes", treat the individual as an Independent Contractor, otherwise treat the individual as an employee.

- | | YES | NO |
|---|-----|----|
| C. Research Trainees/Student Award/Grant/Support | | |

1. Will the student be enrolled during the training period?

If the answer to question 1 is "Yes", treat the individual as a UTEP Student and process payment via Student Notice of Award. If the answer is "No," proceed to question 2, 3, & 4.

2. Will the amount paid/allowed be for the benefit of aid to an individual performing independent educational activities, study, or research?
3. Will the period of service be completed within 90 days?
4. Is research trainee/student pursuing an undergraduate or graduate degree?

If the student is not enrolled and the answer to questions 2, 3, and 4 is "Yes", treat the individual as a Student Research Trainee under Other Personal Services.

- | | YES | NO |
|--|-----|----|
| D. Individuals Not Covered Under A, B and C | | |

1. Has the individual provided the same or similar services to other unrelated entities or to the general public as a trade or business during the last 12 months?
2. Will the period of service exceed 30 days?
3. Will the department provide the individual with specific instructions regarding performance of the required work rather than rely on the individual's expertise?
4. Can the University set the number of hours and/or days of the work week that the individual is required to work, as opposed to allowing the individual to set his/her own work schedule?

If the answer to question 1 is "Yes" and 2, 3, and 4 is "No", treat the individual as an Independent Contractor. Otherwise the individual should be paid as an employee via payroll.

Forms required if employee:

W-4, I-9 complete at Human Resources Office

Forms required if Independent Contractor: Payee Information Form complete at Purchasing Office