

RCUH Employee/Independent Contractor Questionnaire (ICQ-02): Request for RCUH HR Review (10/01/2023)

Upload to [RCUH HR Portal](#) eUpload link or email rcuh_admin@rcuh.com no later than 14 calendar days prior to start of engagement. Once determination is made, attach to the applicable purchase order or payment document.

The RCUH Employee/Independent Contractor Questionnaire (ICQ-02): Request for RCUH HR Review Form is designed to evaluate whether an individual providing specialized services should be classified as an Employee or Independent Contractor per RCUH Policy [3.225](#). This evaluation is based on totality of the circumstances (with reference to [IRS](#) and [US Department of Labor](#) considerations) and not upon administration ease or preference, budget constraints or funding allowability. RCUH Projects who engage with such individuals should submit relevant documentation for determination before any services are performed or payment requests are processed. If a Principal Investigator can confirm qualification under one of the defined Non-Employee designation, then no review is necessary and the [EIC Attestation of Exception to RCUH HR Review Form \(ICQ-01\)](#) may be used instead. A final determination will be provided based on the collective response to the questions below and the supporting documentation provided.

This determination is only part of the requirements necessary to secure the services of an independent contractor and Projects or schools may have more restrictive policies or internal processes. Contact your Fiscal Administrator to ensure you have met all procurement requirements (e.g., proof of insurance, services agreement, etc.) and refer to RCUH Policies for more information:

- [2.005 Identifying Type of Expenditure for Purposes of Determining Tax Treatment](#)
- [2.007 Tax Treatment of Compensation \(Services, Rents, and Royalties\)](#)
- [2.201 Purchase Orders](#)
- [2.204 Services Agreements](#)
- [2.402 Insurance Requirements \(Vendors\)](#)

1. REQUESTOR INFORMATION

- a. Principal Investigator:
- b. Project:
- c. Contact *(if individual other than PI)*:
- d. Email/Phone *(for any questions relating to the engagement)*:

2. INDIVIDUAL/CONSULTANT/BUSINESS ENTITY INFORMATION

- a. Name/Business Entity *(this must match the vendor records and proof of business documentation)*:
- b. Requested Dates of Service:
- c. Is the individual a U.S. citizen or permanent resident?
- d. Is any part of the work physically completed in the U.S.?
- e. Is the work physically completed partially or completely in Hawaii? *(If YES, please attach screenshot of GET license from the [State of Hawaii Tax Website](#) – Search Tax Licenses)*
- f. Individual is a current or former RCUH or UH employee. *(Current or former UH employee is only applicable to UH projects)*

RCUHEmployee/IndependentContractorQuestionnaire(ICQ-02)
Request for RCUHHR Review(10/01/2023)**3. GENERAL INFORMATION**

- a. This individual has never provided services for RCUH or UH (if applicable) in any capacity before providing the services required for this engagement. *If NO, please provide details on the prior services and how they are different.*
- b. No other employees (RCUH or UH) have performed or are performing the same or similar services.
- c. Explain why you believe this engagement requires an independent contractor (as opposed to hiring the individual as an RCUH employee).
- d. Provide a description of the work to be performed. *You may also provide a copy of the Scope of Services from the Services Agreement, if applicable.*

4. DEGREE OF BEHAVIORAL CONTROL/INDEPENDENCE

- a. The individual will not receive supervision/instruction by the project once the agreement is in place.
- b. The individual is free to determine the means and methods to accomplish the deliverables.
- c. The individual is free to determine the hours worked, within general parameters (e.g. during regular business hours)?
- d. Does the individual employ others to provide services?

5. DEGREE OF FINANCIAL CONTROL/INDEPENDENCE

- a. Type of pay received by individual:
- b. Total estimated payment amount for the services:
- c. Will the RCUH project provide office space, equipment, facilities, training or other materials to the individual to perform these services?



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6. TYPE OF RELATIONSHIP

- a. An Agreement for Services, contract or other terms has been executed/is in draft for this engagement.
- b. This individual performs similar services for other clients.
- c. There is additional proof of business setup attached (*attach website, CV, etc.*).

7. ACKNOWLEDGEMENT AND CERTIFICATION

The information provided on this form and attachments is true and complete to the best of my knowledge.

PI Signature/Date:

Notes:

Attachments (if applicable):

- Hawaii GET (2e) - *if work completed in Hawaii*
- Scope of Services (3g)
- Additional proof of business (6c)

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INTERNAL PROCESSING (RCUH HR STAFF USE ONLY):

RCUHHUMAN RESOURCES INDEPENDENT CONTRACTOR QUESTIONNAIRE (ICQ-02) FINAL DETERMINATION

I have reviewed the RCUH Independent Contractor Questionnaire and backup documentation submitted and have made the following determination.

Name/Business Entity:

Requested Dates of Service:

EMPLOYEE

Proceed to request a Non-Recruited hire per RCUH Policy 3.210 (cc Employment)

INDEPENDENT CONTRACTOR

Attach completed form to applicable purchase order or payment document. If individual is not a U.S. citizen or permanent resident, contact RCUH Disbursing at rcuhdisb@rcuh.com prior to commencing services.

Other

RCUH HR Signature/Date:

Special Notes: Independent Contractors are “non-employees” and not considered RCUH volunteers. Therefore, these individuals are not covered by RCUH’s Workers’ Compensation Insurance nor are they eligible to file for Unemployment under RCUH. Any form of compensation made to individuals may be subject to 1099 or 1042-S reporting.