



CLICK HERE
to submit your form

Application for Certification as Independent Contractor

All approvals are required prior to commencement of service

(Form is effective for 12 months from date of applicant's signature. See page 3 for instructions on completing this form)

SECTION I (completed and signed by applicant)

PERSONAL INFORMATION

Legal Name: _____ Last 4 numbers of SSN/ITIN/EIN: _____
 Company Name: _____ Email Address: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Make check payable to: _____ Phone number: _____
 Residency status for tax purposes (check one): U.S. Citizen Resident Alien Nonresident Alien
 Please provide an email address of the UNCW employee who sent you this form: _____

VENDOR INFORMATION

Will this service be provided on an ongoing basis or one time?	Ongoing Basis	One Time
Have you worked at UNCW as an independent contractor before? <i>If yes, please tell us how:</i>	Yes	No
Describe service that is to be provided:		
<i>*If vendor has unsupervised contact with students and/or minors, a background check is required to be completed. Work cannot be approved to begin until the background check is completed</i>		

1. Are you related by blood or marriage to a UNCW employee or officer? <i>If yes, tell us the relationship, name & department:</i>	Yes	No
2. Do you have a business association with a UNCW employee or officer? <i>If yes, tell us the relationship, name & department:</i>	Yes	No
3. Are you receiving retirement benefits through the NC Teachers' & State Employees' Retirement System (TSERS) or the Optional Retirement Plan (ORP)? <i>If yes, which system?</i>	Yes	No
4. Are you employed by a NC school system or community college?	Yes	No
5. Have you contributed to the state retirement system, either TSERS or ORP?	Yes	No
6. Within this calendar year, have you been a UNCW student or student employee?	Yes	No
7. Will you receive a W-2 from an NC state agency or a UNC university in the current calendar year? <i>If yes, what state agency or university?</i>	Yes	No

Vendor Information (continued)		
8. Do you offer your services to others as part of a trade or business?	Yes	No
9. I will receive little or no training, supervision, or instruction from UNCW, other than receiving the scope of services.	Yes	No
10. I set my own priorities, timeline, amount of effort, hours of work and work independently to accomplish the services within the required time frame.	Yes	No
11. I have made an investment in my own trade or business, which may include obtaining a business EIN from the IRS.	Yes	No
12. I pay for my own business/travel expenses.	Yes	No
13. I provide most of my own tools/supplies/materials.	Yes	No
14. I have my own insurance for work-related injuries.	Yes	No

By signing below, I certify that all the information provided in this application is correct and, if applicable, that I am a vendor in good standing with both state and federal agencies. I understand that the payments I receive are subject to IRS regulations and may be taxable income, subject to backup withholding and 1099 or 1042-S federal reporting. Payments in excess of \$1,500 may be subject to 4% NC withholding tax. Depending on services provided to UNCW, I may be subject to a criminal background check. I also agree that I shall hold and save the University, its officers, agents, and employees, harmless from liability of any kind and from any and all claims and losses accruing or resulting to any person, firm or corporation that may be injured or damaged in the performance of this service. I represent and warrant that I shall make no claim of any kind or nature against the University's agents who are involved in the delivery or processing of my services to the University. This is an application and should not be construed as acceptance of an offer for services.

Signature: _____ Date: _____

SECTION II (completed by UNCW department initiating services)

PAYMENT OPTIONS (include all that apply)		
A.	Service Fee	\$ _____
B.	UNCW Paid Lodging	\$ _____
C.	Prepay Airfare	\$ _____
D.	Misc. Items	\$ _____
Prepared by:		Department:

Will the vendor have unsupervised contact with students and/or minors? Yes No

If yes, applicant must submit a [criminal background check release form](#) to Human Resources. Human Resources must have given approval to begin work prior to services starting.

Will services be performed in North Carolina? Yes No Date(s) of service/performance to

COMMENTS (optional)

Procedures for engaging services of an Independent Contractor

1. Applicant completes and signs Section I of the PUR 1.40 Application.
2. Applicant has the option of faxing the IRS Form W-9 to 910/962-7006 (this is the most secure option), or mailing it to UNCW Disbursements Office, 601 S. College Road, Wilmington, NC 28403-5903, or emailing it to accountspayable@uncw.edu. W-9 should not be emailed to the department.
3. Requesting UNCW department completes the PUR1.40 form Section II.
 - a. If applicant will have unsupervised contact with students/minors, a Criminal Background Check Release Form must be completed by the applicant and submitted to Human Resources. The cost of the background check will be charged to the initiating UNCW department. Human Resources will notify the department when background check is complete. *The application cannot be approved until the background check is completed.*
 - b. The Service Fee (Section II, Item “A”) is processed through uShop with the PUR 1.40 application attached to the cart. Any travel arrangements that UNCW will be responsible for arranging are to be processed on a Chrome River expense report with a copy of the PUR 1.40 application attached to the cart. See [“Travel for Independent Contractors.”](#)
4. Log in to uShop, click on the Special Processing form for Independent Contractors located in the top row of the home page. Follow the instructions to upload the PUR 1.40 form. The requisition will route through the uShop's workflow to create a purchase order. Services may begin only when the purchase order has been created.
5. Upon completion of services, the uShop receipt is processed and invoice is submitted to Accounts Payable. Payment is made on the next available disbursement cycle.

Important Information

- If applicant is a nonresident alien, contact the Tax Office at 910/962-2757. Additional information and forms may be required.
- PUR 1.40 Application is effective for 12 months from the approval date if the scope of the service and the need for a criminal background check have not changed.
- UNCW will pay travel reimbursements to the independent contractor only and not a third party, such as a faculty or staff member on behalf of the independent contractor.
- For services totaling \$10,000 or more, contact Purchasing to draft a Personal Services contract. Attach resume, scope of services or quote.

Need assistance? We’re here to help!

Purchasing	Human Resources	Tax	Travel/Disbursements	Sponsored Programs
910.962.3190	910.962.3160	910.962.2757	910.962.3076	910.962.3810