



QUESTIONNAIRE

Determination of Employee or Self-employed/Independent Contractor Status

Name of Payee: _____ / _____ (please print)
Last Name First Name

McGill ID Number: _____ (if applicable)

Faculty / Department: _____

Brief description of work performed:

Facts and/or information	Yes	No
Do you hold a recognized, academic position at McGill University and/or its associated hospitals?		
Are the services being rendered, in whole or in part, consistent with those which would be governed by your appointment?		
Do you participate in McGill's benefit plans and pension plan?		
Are the services being rendered invoiced on your personal account rather than through an incorporated business? – If no, please complete the attached attestation		
Do you have access to a University office or work in a laboratory of the University?		
Have you been assigned a University telephone line?		
Have you been assigned a University staff email address?		
Is your engagement open-ended, as opposed to being for a limited period of time?		
Have you been engaged to give a lecture, seminar, conference, or similar activity listed in the University's official course calendar for a specified period of time?		
Is the planning, execution and supervision of the work overseen by a McGill employee? - This would include one or more of the following: Establishing work location, days and hours of work, vacations, etc.		
Are you provided with one or more of the following by the University? - Training, supervision, activity reporting, progress reviews, evaluations, directions as to the output expected (such as subject or content of a course) or specific results of a project,		
To complete the work, are you using one or more of the following provided by the University: Computers, tools, office supplies, delivery, shipping costs, rental of equipment and insurance?		
If additional help is required to complete the task, is it the responsibility of the University to hire additional staff?		
If you require additional time to complete your tasks, will the University compensate you?		

The above questionnaire is intended to provide guidance in assessing an individual's employment status with the University. If the majority of the responses are "Yes", there is no need to submit this form to the University and the University reserves the right to treat the individual as an "employee" rather than self-employed/independent contractor. If the individual is considered an employee, the applicable income tax and social security premiums will be withheld. At year end a T4 Statement of Remuneration and Relevé 1 Revenu d'Emploi will be issued identifying the remuneration earned and applicable withholdings.

Where the majority of responses are "No", the individual may be considered self-employed/independent contractor. The form must be signed and submitted to the Accounting Department for review. Please note the information provided may be subject to audit by the Payroll Office. This form must be accompanied with an originally signed invoice prior to the processing of any payment. It is mandatory that a signed contract between the two parties be retained in the department. The contract should confirm the exact nature of the work to be performed, the time frame and remuneration amongst other items.

Please note, failure to disclose accurate information when completing the above questionnaire, may result in the immediate termination of the individual's employment contract or contract to provide self-employment services to the University.

Signature of Payee: _____ **Date:** _____ **Phone:** _____

Signature of Unit Head: _____ **Date:** _____ **Phone:** _____

Financial Services/Payroll Approval: _____ **Date:** _____



Incorporated business providing services to McGill University
(where one of the incorporated business's employees is a regular McGill employee).

I, _____, as officer of _____
SIGNING OFFICER CORPORATE NAME

(Incorporated business) attest that the incorporated entity has been engaged by McGill University to perform _____ Services, as outlined in the terms if engagement.

NOTE: Please find attached a duly authorized copy of incorporation documents attesting that this incorporated entity is registered and in good standing.

SIGNING OFFICER DATE

Canada Revenue Agency Business Number (BN): _____

GST registration number: _____

QST registration number: _____

Please note that employees whom are invoicing their employer via an incorporated company for services rendered may risk a restriction on deductible expenses and be subject to penalties and interest if Canada Revenue Agency or Revenue Quebec deems the incorporated company to be a Personal Service Business. Please consult a tax professional for the related potential consequences.