Brigham Young University – Hawaii

REQUEST FOR INDEPENDENT CONTRACTOR

Requesting Department:	Type of Service:
Name of Individual:	Employer/Vendor ID#:
Doing Business As:	

PROJECT START/END DATES

This Payment Amount:		From:	To:
Full Contracted Amount:	Total amount paid to date:	Account #:	
Mail Check To:		❒ Check if requesting '**Direct Deposit**' ***[only if account form in on file]***	

INITIAL APPROVALS/AUTHORIZATED SIGNATURES

Dean/Associate Dean/Director/Supervisor	*Materials Management Director*	*President's Council* ***[President's Council signature required for requests over $2,500]***
Date	*Date:*	*Date*

CHECK LIST OF COMPLETED DOCUMENTATION

☐	Initial Approval	☐	W-9 Completed
☐	Independent Contract Agreement	☐	Vendor Add Form

Submit this form and all completed documentation to the Human Resource Services office for final approval.

FINAL APPROVALS/AUTHORIZATION SIGNATURES FOR PAYMENT

Human Resources	*Date*	*Date submitted to Financial Services*

Distribution: *Original HR/Yellow-Accounts payable/Pink-Department/Goldenrod- Independent Contractor*