

Service Provider Questionnaire

Greenville Technical College (GTC) requests this information in order to evaluate the appropriate service provider classification under IRS guidelines (i.e., employee vs. independent contractor). Return your completed questionnaire to the GTC unit seeking to engage your services.

Pa	art 1 Service Provider Information				
Ser	ervice Provider:				
Doi	oing Business As:				
1. [Describe the exact nature of your trade, occupation, profession or be	ousiness:			
	Please indicate how your business is organized: Sole Proprietor Corporation Limited Liability Compan	y Partnership	Professional Corporation		
3. [Do you use your U.S. Social security number as your business feder	eral ID number? Yes	No		
4. [Did you file a business tax return last year for this business?	Yes	No – If no, why not?		
5. [Do you have the opportunity to make a profit or loss in this busines	s? Yes	No		
	Approximately what percentage of your business is GTC work? a. If you worked for other clients, did your non-GTC clients issue you		No		
7. I	How often do you anticipate working for GTC?	nticipate working for GTC? times in a calendar year			
8. [Do you work for more than one client at a time?	Yes	No		
	Do you use assistants or hire others to provide your business serving use assistants, answer questions a and b below:	ces? Yes	No		
	a. Do you personally pay your assistants?b. Are you responsible for supervising the details of your ass	Yes sistants' work? Yes	No No		
). Have you worked as an employee for Greenville Technical College		No		

11. Where do you advertise your se						
Word of Mouth	Yellow Pages	Publications	Websites	Other		
		ck all that apply)				
List publication names and the	ir Web addresses, if a	applicable				
12. Will you require the use of any	Groonvilla Tachnical	College facilities, equipmen	t or matarials to provi	do vour conjecc?		
12. Will you require the use of any	Greenville recrimical	College facilities, equipmen	Yes No	de your services:		
If yes, please explain:			100 110			
13. My principle place of business						
Home Office	GTC Office R	ented Office Other (expl	ain)			
AA lalantification to man of	-	(l - i -)				
14. Identify the types of cost you incur in	Equipment	t (explain)				
your business:	Payroll (nu	Payroll (number of employees)				
your business.	r dyron (nd	Taylor (number of onlyloyees)				
Other (explain)						
Part 2 Service Provi	der Attestati	on and Verification	on			
I am a citizen of the U.S. or a permaner	nt resident (green card).	Lam not a GTC student or GT	C employee. If GTC hir	es me as an independent		
contractor a) I am responsible for taxes	·=					
contractor a) i ani responsible for taxes	, insurance coverage an	iu busiliess expelises, aliu b) i	ani not eligible for any e	imployer-provider benefits.		
Signature:			Date:			
olgriatare.			Date:			
Name:		Title:				
Phone:	Email:					
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