



## EMPLOYEE / INDEPENDENT CONTRACTOR Checklist

### ACCESSIBILITY:

To request this file in large print, please email [aoda@wcdsb.ca](mailto:aoda@wcdsb.ca) or call (519) 578-3660.

	YES	NO
1. Does the employer control where the work will be performed?	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the employer tell the worker what hours to perform the work?	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the employer supervise the worker or require the worker to 'check-in' daily, as opposed to receiving periodic status or progress reports?	<input type="checkbox"/>	<input type="checkbox"/>
4. Does the employer have the right to require the worker to redo the work if it is not satisfactory?	<input type="checkbox"/>	<input type="checkbox"/>
5. If the work must be redone, does the employer pay the related costs?	<input type="checkbox"/>	<input type="checkbox"/>
6. Does the employer provide the worker with office space?	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the employer pay insurance premiums or payroll taxes for the worker?	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the employer provide fringe benefits to the worker (e.g. health insurance, vacation or sick leave, holiday pay)?	<input type="checkbox"/>	<input type="checkbox"/>
9. Is the worker paid an hourly rate, as opposed to submitting an invoice for the cost of their services?	<input type="checkbox"/>	<input type="checkbox"/>
10. Is the worker paid the same amount regardless of whether the project or the employer's business is successful?	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the employer provide or pay for the tools and equipment necessary for the worker to perform the work?	<input type="checkbox"/>	<input type="checkbox"/>
12. Does the employer maintain or pay to maintain the worker's tools and equipment?	<input type="checkbox"/>	<input type="checkbox"/>
13. Does the employer provide or pay for materials necessary to perform the work?	<input type="checkbox"/>	<input type="checkbox"/>
14. Is the employer responsible for replacing materials that are lost or damaged?	<input type="checkbox"/>	<input type="checkbox"/>
15. Is the relationship between the employer and worker a continuing one, as opposed to a relationship based on a distinct project with a foreseeable end?	<input type="checkbox"/>	<input type="checkbox"/>
16. Must the worker obtain the employer's permission to hire and pay others to do the work?	<input type="checkbox"/>	<input type="checkbox"/>
17. Does the employer train the worker or others whom the worker supervises?	<input type="checkbox"/>	<input type="checkbox"/>



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	YES	NO
18. Does the employer pay for any losses, expenses or damages incurred while the project is being completed?	<input type="checkbox"/>	<input type="checkbox"/>
19. Must the worker obtain the employer's permission to work for other individuals or organizations?	<input type="checkbox"/>	<input type="checkbox"/>
20. Is the employer dependent upon the worker to continue its business?	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL</b>	_____	_____

### Disclaimer

Information on this form is collected pursuant to the board's responsibilities set out in the Education Act and protected in accordance with the Municipal Freedom of Information and Protection of Privacy Act. Information on this form will be used to administer the Engagement of Individuals in Contract Work. Questions regarding the collection of this information should be directed to Manager of Supply & Administrative Services, 519-578-3660 ext 2323.

**To be Completed by:** WCDSB Staff Member who is responsible for contract hiring

**Distribution:** N/A

**Retention:** N/A