

CERTIFICATION FOR PROFESSIONAL SERVICES ACQUISITIONS

The following statements will help determine if the proposed procurement is personal in nature and could result in an employer-employee relationship. The increased frequency of "yes" response increases the possibility of the existence of an employer-employee relationship and indicates that the advice of the ICD Personnel Office should be solicited.

Yes No The procurement. . .

___ ___ 1. involves a guest speaker, lecturer or participant for seminar, workshop, or meeting held primarily to exchange scientific information.

___ ___ 2. involves advisory services performed by national commissions, advisory committees or groups, review panels, boards and committees.

___ ___ 3. involves review groups for contract proposals or grant applications.

(If statements 1, 2, or 3 have been answered "yes" routing to the ICD Personnel Office is not necessary.)

___ ___ 4. requires on-site performance.

___ ___ 5. requires that the principal tools and equipment be furnished by the government.

___ ___ 6. is an integral part of the assigned mission or function of NIH.

___ ___ * 7. is the type ordinarily performed by Civil Service personnel.

___ ___ 8. can reasonably be expected to last beyond one year.

___ ___ 9. requires government approval for hiring and removal of key contract employees.

___ ___ 10. requires the government to prepare schedules for individual contract employees.

___ ___ 11. requires the government to control the method of contract performance.

___ ___ 12. allows the contract tasks to be defined on a day-to-day basis.

___ ___ 13. provides payment for time worked rather than accomplished results (this statement should only be considered for doubtful cases).

(If any statement (4 through 13) has been answered "yes" routing to the ICD Personnel Office is necessary.)

*If #7 is checked "yes," indicate by checking appropriate box(es) below why this work is proposed to be done by contract/purchase order. Explain briefly on the back of this form.

- No qualified NIH employees are available to perform the work.
- It has been determined that it would be substantially more economical, feasible, or necessary by reason of unusual circumstances to have the work performed through this contract/purchase order. (State briefly on reverse how this was determined.)
- Other (Explain on reverse.)

SALARY RATES

Complete this section if the daily rate to be paid to a person or persons under this contract/purchase order exceeds the current daily rate of a GS-18 in the federal service.

I have made an administrative determination that the award of this contract/purchase order is in the best interest of the U.S. Government. The salary rate(s) contained in this contract/purchase order is/are fully justified for the reasons stated below.

GAM 8-15 CERTIFICATION (Check One)

- I certify that this request for consulting services has been reviewed and is in accordance with the terms and conditions of GAM 8-15.
- The consulting service being procured is excluded from coverage of GAM 8-15.

Certifying Official's Signature

ICD PERSONNEL ADVICE (if solicited)

- This action would not result in an employer-employee relationship.
- This action would result in an employer-employee relationship. (If this item is checked, the action is not appropriate for procurement acquisition.)

Personnel Specialist's Signature

DISPOSITION OF ACTION

Requisition No.	Requisitioner's Signature	Date
<input type="checkbox"/> Approved	ICD Approving Officer's Signature*	Date
<input type="checkbox"/> Disapproved		

*The "appropriate approving official" is either the ICD Executive Officer or Administrative Officer depending on the existing internal delegation.

It has been determined that it would be substantially more economical, feasible, or necessary by reason of unusual circumstances to have the work performed through this contract/purchase order. (State briefly.)

Other (Explain.)