School of Social Welfare - Honorarium Request Form

Honoraria payments **must be approved in advance** by the Dean and the Assistant Dean and are subject to applicable sections of the Academic Personnel Manual. Payments to individuals are subject to income tax reporting and visa restrictions.

Honorarium Recipient Information

| Address | | | | | |
|---------------------------|------------------------|---|----------------|---------------|--------------|
| City | | | State | Zip | |
| Foreign Province | | | Country | | |
| Phone | | | E-mail | | |
| | Yes No | 1 | <u>'</u> | | |
| UC Em | nployee? | Where? | | | |
| California R | esident? | | | | |
| Foreign N | Vational? | Country and Visa | | | |
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| | - | of how payment benefit ntation for non-class | | yer, announce | ement or ema |
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| ***Please provide s | - | | | yer, announce | ement or ema |