

Honorarium Recipient Employment Status Worksheet

If the recipient is a new vendor for UC Berkeley please complete a New Vendor form: <http://procurement.berkeley.edu/programs/vendor>

Information about Recipient: *(incomplete data may result in a delay of payment)*

Name	<input type="text"/>	Street Address	<input type="text"/>
City	<input type="text"/>	State/ZIP	<input type="text"/>
Email Address	<input type="text"/>	<input type="checkbox"/> Non Resident Alien	<input type="checkbox"/> California Resident
If Foreign National - Country	<input type="text"/>	Visa Type	<input type="text"/>
The dates of activity at the University of CA will be from	<input type="text"/>	to	<input type="text"/>
Are you on records as a current employee of this Campus or another UC location?	<input type="text"/>		
If yes, which campus/location?	<input type="text"/>	Employee ID #	<input type="text"/>
Title Code	<input type="text"/>	Appt. Percentage	<input type="text"/>
		Annual Salary	<input type="text"/>

If the recipient would like the payment made to a third party please give the name and address. A vendor form for the third party may need to be completed to set them up as a payee.

Amount to be Paid	<input type="text"/>	COA:	<input type="text"/>
		PI or Department Name:	<input type="text"/>

Certification: I certify that the information contained on this form is to the best of my knowledge and belief, true and complete.

Signature of Honorarium Recipient or Responsible Department:

_____ Date

Prepared By: _____ Date

Approvals:		
Name/Title:	Signature:	Date:

Glacier Record Entered

Updated: 2015-03-18