

HONORARIUM STATUS DETERMINATION FORM

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UNIVERSITY
of ALASKA
Many Traditions One Alaska

RESET FORM

Req No.

Procurement & Contract Services
PO Box 757940 Fairbanks, Alaska 99709-7940
www.alaska.edu/procurement/

Payee Name:

Permanent Address:

City: State: ZipCode + 4:

Phone Number

UA Vendor ID#:

Describe the services provided for the University:

Dates Performed

Is the individual receiving the honorarium an employee of the University?

Yes No

Has the individual receiving the honorarium been offered and agreed to accept payment of fee contingent upon performance?

Yes No

Is the University paying for any travel related to this honorarium, either directly to the service provider (e.g. air carrier, hotel, rental car) or via a reimbursement of travel costs through a Travel Expense Report?

Yes No

Any verbal or written agreement in which the University will be obligated to pay for services or expenses or accommodations is a contractual arrangement and must be made in accordance with University policies and procedures.

Department Head Signature: _____

Department Head Name:

Date:

Approved by Procurement:

Date: