



Honorarium Status Determination Form

(Under \$1000)

Office of Finance and Accounting PO Box 757920 Fairbanks, Alaska 99775-7920 https://www.uaf.edu/finserv/finance-accounting/

AIRBANKS	nttps://www.uar.edu/fins	serv/finance-ac	counting/
Encumbrance No			
Payee Name			
Permanent Address			
City	Stat	·e	Zip Code
Phone Number		Vendor ID	•
Describe the services p	rovided for the University:		
	Honorarium Amount		
Dates Perfomed			
Is the individual receiving the	honorarium an employee of the L	Jniversity?	
Yes** No			
**If you have selected Yes on the a	above question this payment will need to	o be processed throu	ugh Human Resources as a bonus
Has the individual receiving the	ne honorarium been offered and a	agreed to accept	payment of fee contingent upon performance?
Yes No			
	ny travel related to this honorariur of travel costs through Concur?	m, either directly t	to the service provider (e.g. air carrier, hotel, renta
Yes No			
	which the University will be obligated to accordance with University policies and		expenses or accommodations is a contractual
Department Head Signature:			
Department Head Name:			
Date:			
OFA USE ONLY			
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