Honorarium Request form				
Full Name:				
Residential Mailing Address (No work addresses	or PO Boxes allowed. Ple	ease include city, stat	e and zip code):	
Phone Number:		(Dept. Coordinat	or will call to obtain your SSN)	
Association/Home Institution:				
Position/Title:				
Event Date:	US (Citizen:□	Other:	
Event purpose (Attach Flyer if available):				
Have you been paid by UCLA in the past?				
For Virtual Events: Where will services be	rendered?			
Are you curently employed by the Universit	ty of California?			
, , , ,	•			
Amount USD: \$				
Foreign Guest Speaker: Give advance in REQUIRED: Visitor NEEDS to fill out requipelease see Dept. Coordinator, Adriana Ros	ired forms and pro			
Type of Visa (Check one) B1Visa Canadian Citizen/B1 Status	B2 Visa J1 Scholar	WB Status O1 Visa	WT Status Other:	
Attach the following documents:				
* Visa / Passport / Immigration Stamp * I-94 (IMPORTANT: Submit copy b				
Individual Tax ID? Yes/No:	_			
Complete initial Glacier Information Form				
NOTES: Expect e-mail from support@online-tax.net with G Once the Glacier Tax Record has been completed p information indicated on page 2 of the Glacier Tax time of receiving GLACIER email.) If you have an	blease print, sign, dat Summary in a timel	te and submit the y manner to insu	required tax forms and support re correct withholding (7 days f	ting rom
Purpose of GLACIER:U.S Tax law requires UCLA tax purposes. UCLA collects that information via Coan be found at www.irs.gov				