

## Texas Christian University Honorarium (Payment for Services) Request

This document must be completed prior to issuing payment. Submit completed form to Accounts Payable, Sadler Hall #2011, TCU Box 297011.

	Mail Check:		Pick Up	Check			
Name			<u> </u>				
Tax ID # or SSN #				International	l: LYes	∐ 1	No
Permanent Address							
Amount			]				
Authorized Codes	Account		Fund	Dept	Project		
Approver's Name:							
Approver's Signature:							
Attach a copy of written agree	ement or explain the	e nature	and DATE (	OF SERVICES perf	ormed.		
						YES	NO
2. Is this individual presently in th	e employ of Texas	Christia	an University	or Brite Divinity Sc	hool?		
If the answer to question 2 is "	yes", you do not	need to	complete th	ne remainder of th	is form.		
3. Must this individual comply with	n instructions abou	it when	and how ser	vices are performed	?		
4. Is this individual trained by the	University to perfo	rm the	service?				
5. Is the service similar to service	s generally perforr	med by	other Univers	sity employees?			
6. Is this individual assigned a Ur	iversity employee	to assis	t him or her?				
7. Does this individual perform the	e same service for	the Uni	versity on a f	requent basis?			
3. Does the University supply the	tools, materials ar	nd suppl	ies necessar	y to complete the a	ssignment?		
9. May this individual determine h	nis or her own work	king hou	rs?				
0. Does this individual market his	s or her services to	the gei	neral public?				

After a review of the answers presented above, it may be necessary to classify the individual as an employee and issue the payment on a payroll check with applicable taxes withheld.



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