

PAYMENT DATA FORM
FOR
SHORT-TERM LECTURERS, CONSULTANTS AND INDEPENDENT CONTRACTORS

TO BE COMPLETED BY THE HIRING DEPARTMENT

1. Print payee's name: _____
2. Has this individual been on the Pratt payroll or a Pratt employee during the last 12 months?
3. How is the individual to be paid? (check all that apply)
 - a. _____ Expense reimbursement (detailed receipts must be attached)
 - b. _____ Honorarium for services
 - c. _____ Rate for services (circle one: hourly daily per project)
4. What is the anticipated duration of service to Pratt?
 - a. _____ 1 day or less
 - b. _____ 2-9 days
 - c. _____ 10 days or more
5. Short description of services or lecture content.
6. If the individual is not a current Pratt employee, he/she must **fully** complete the Visitor Information Sheet.

Please use one form per individual per lecture, lecture series, service or project. Please note this process is **required** to effect payment. Individuals who are not pre-approved cannot be paid through Pratt Institute. For clarification of these procedures, please call Dian Jones at 2667 or Amy Hecht at 3734.

Submitted by: (please print) _____ Date: _____

Sponsoring Department: _____

FOR HUMAN RESOURCES USE ONLY

The above referenced individual has been conditionally approved as a short-term lecturer, consultant or independent contractor subject to submission of the following document(s) on or before the **first date** of service:

____ W-9 ____ 8233 ____ INS Work Authorization Copies (indicate below)

If you have questions, please call me.

Approved by: _____ Date: _____

Ext. _____