



PARTICIPANT STIPEND FORM

(Type or Print Clearly)

First Name, Middle Initial, Last Name		Taxpayer ID (Social Security Number)		
<input type="checkbox"/> CHECK TO CAMPUS		<input type="checkbox"/> MAIL CHECK DIRECTLY TO PARTICIPANT		<input type="checkbox"/> ACH
DATES OF PARTICIPATION:				
DESCRIPTION OF EVENT:				
Mailing Address of Participant:				
Street/Apt				
City		State		Postal Code
Country		Province		
Telephone		Email		
<p><u>If US Citizen or Resident Alien:</u> Reportable to the IRS, reported on 1099 Misc as Other Income, therefore a 1099 supplier site that must exist.</p> <p>Please check box if <input type="checkbox"/> US Citizen or <input type="checkbox"/> Resident Alien</p>				

<p><u>If Non-Resident Alien:</u> Payments are taxable at 30% unless an exemption applies. If exemption applies, check this box and attach completed form Nonresident Alien Participant Stipend Tax Exemption Certificate.</p> <p><u>Sponsor Controlled:</u> _____</p> <p>Please check box if <input type="checkbox"/> Non-Resident Alien</p>				

Stipend Amount: \$				
Project	Task	Award	Expenditure Type	Organization