

WAYNE STATE UNIVERSITY Honoraria/Award Data Form

Complete the following (incomplete forms will not be prod	essed):		
Payee's Full Name (include middle initial):	Banner ID/SSN/ITIN:		
Are You:			
A citizen or Permanent Resident of the U.S.?		Ves	○ No
If "Yes", complete this form and a W-9.		163	U NO
•			
If "No", complete this form and a W-8.			
A Full or Part-time employee of Wayne State University?	?	Yes	○ No
A Student at Wayne State University?		Yes	O No
Have you received any payments from the University with	in the past 12 months?	Yes	○ No
If "Yes", complete the following:			
Date(s) of Payment:	Amount(s) of Payment:		
Honoraria/Award Information:			
Date(s) services will be provided:			
Describe what the payment is for:			
Location services will be provided:			
Payee's Certification: I certify that the information contained in the all		•	nts
about the payee presents a fair and accurate presentation of my stati responsible assertion to the Internal Revenue Service.	us for tax and immigration purposes which	cn constitutes a	
Signature of Payee	Da	ate	