Student Affairs Honorarium Form
Northwestern Health Sciences University
Student Affairs Department

Directions: To be paid an honorarium fill out this form and return it to the Office of Student Affairs with a signed W9 form within 10 days of your seminar. Please print clearly and fill out completely.

Name: __________________________________________

Business Name (if applicable): __________________________________________

Address: __________________________________________

City, State, Zip: ________________________________ Email: ______________________

Event Name: __________________________________________

Event Date(s): ________________________________

Sponsoring Club, Org. or Student Affairs Dept.: __________________________________________

Honorarium: $__________
(Refer to your contract)

Return form to:
Office of Student Affairs
Email: studentaffairs@nwhealth.edu
Northwestern Health Sciences University
2501 W. 84th Street, Bloomington, MN 55431
Phone: (952) 885-5405; Fax: (952) 886-7566

Effective Date: 02/22/2021

For Office Use Only
☐ Student Affairs Dept. Events: 1010-20320-520020
☐ Student Senate & Org. Events: 4010-20390-520020
☐ Other Dept. GL Code: _______ - _______ -520020

Approved By (Print): __________________________

Date Submitted: __________________________