

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: _____