

**Yale University School of Architecture**  
**HONORARIUM REQUEST FORM**

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**VISITORS:** Please provide *all* information within this section and return it to the individual who invited you to the school. If you were offered reimbursement for your travel expenses, attach your **original** receipts to this form. If you were not offered reimbursement for your travel expenses, you were either provided with transportation or your honorarium amount will include an allowance for your travel expenses. You should receive payment within four weeks.

Name: \_\_\_\_\_ Date of Visit \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
(Must be home address)

e-mail: \_\_\_\_\_ telephone # \_\_\_\_\_

**Have you ever received an honorarium or reimbursement from the School before?** Yes No

If No and you are a U.S. citizen or permanent resident, fill out and attach a W-9 Form (refer to link at the bottom of the page).

**Citizenship:** U.S.  U.S. Permanent Resident  Non-U.S.\* \*see below

**\*Note:** In order for non-U.S. citizens to be paid, they must provide the following (refer to form links at the bottom of the page):

1. Photocopy of photo page of your Passport plus photocopy of your I-94 Form and visa page, if applicable.
2. International Information Form (IFF) and Certificate of Foreign Status of Beneficial Owner (W-8).
3. If there is a tax treaty with your country of residence and the U.S. complete an Application for Taxpayer ID Number Form (W-7), if you do not have a U.S. Social Security number or TIN and complete a U.S. tax Exempt Form (8233).
4. Complete a Request for Waiver of Withholding (CT-590) if your honorarium is between \$1,001-\$3,000.

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**FACULTY MEMBER:** Once your visitor has completed the top portion of this form, complete this portion of the form. Make certain that any needed documents and/or receipts are attached.

Faculty Member Name \_\_\_\_\_

Course Number \_\_\_\_\_ Course Name \_\_\_\_\_

Requested Amount of Honorarium \$ \_\_\_\_\_ (see below for amount)

**Note:** Honorarium is limited to the following unless there is **prior** approval from Phil Bernstein

- If visitor did not travel by air but we provided car service: \$100/day
- If visitor did not travel by air and we did not provide car service:  
Select one of the following if traveling from or nearby (amounts listed **include** a travel allowance):  
**New Haven: \$150 New York: CAR/\$250, RAIL/\$200 Providence: CAR/\$260, RAIL/\$240**  
**Boston: CAR/\$300, RAIL/\$270 Philadelphia or Princeton: CAR/\$340 RAIL/\$290**
- **(RAIL FROM NY METRO NORTH, FOR PHILADELPHIA, PRINCETON, BOSTON AMTRAK COARCH RESERVED)**  
(Each additional day with stay over in New Haven: add \$100/day.)
- If visitor traveled by air, list the approved honorarium amount that was approved in advance by Phil Bernstein; maximum allowed is= \$150 base + \$300 r/t ground (home) + latest average fare found in the Bureau of Transportation Statistics site: <https://www.transtats.bts.gov/AverageFare/Default.aspx>

Faculty Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit this completed form with all attachments as applicable to [rosemary.watts@yale.edu](mailto:rosemary.watts@yale.edu) or [zelma.brunson@yale.edu](mailto:zelma.brunson@yale.edu)

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**Links to forms:** W-9 form W-8 form IIF form W-7 form 8233 form CT-590 form