



Honorarium Request

Amount must be **\$500 or less**, see [Honorarium Guidelines](#).

Please allow up to two weeks for processing. Incorrect or missing information may delay processing.

Send the completed form to Accounts Payable | acctspayable@ufv.ca

Cheque Information

Date cheque requested: _____ Date cheque required: _____

Cheque payable to (legal name): _____

UFV ID number: _____ Current UFV employee ☐ Yes ☐ No

Home address: _____

City: _____ Province: _____ Postal code: _____

*Social insurance number (SIN): _____

*The Canada Revenue Agency (CRA) requires the university to report all payments for services made to an individual that total more than \$500 CAD in a calendar year. To meet this requirement and issue a T4A slip, when necessary, UFV is required to collect the individual's Social Insurance Number (SIN) to accurately track and report payments.

Privacy notification: The personal information requested on this form is collected under the authority of the University Act, and in accordance with the Freedom of Information and Protection of Privacy Act (FIPPA). The information will only be used for the sole purpose of issuing honorariums. Direct any questions about this collection to Legal Counsel at legal@ufv.ca or visit www.ufv.ca/informationprivacy.

Department: _____ Budget code: _____ Amount: _____

Payment Information

Date(s) of service:

Reason for honorarium:

Mailing instructions:
(if different from above)

Authorization

Requestor: _____

Signing authority: _____
Name Signature Date