

Guest Speaker/Lecturer/Performer/Artist Payment Request Short Form

I. Guest Speaker Informa	tion – All informatio	on is required.		
Distinguished in his or her students, faculty or staff. Request Form and an IR	field of specialization for services	n who shall visit T shall be made utili	CNJ to either lecture or zing an Accounts Paya	r interact with able Check
Distinguished in his or her artistic classes. Payment to and an IRS W-9, Request	field of specialization for services shall be n	on who shall visit T nade utilizing an A	CNJ and either conduction counts Payable Chec	t performances or
Name and Address of Contra	actor	Name and Address of TCNJ Department		
		_		
Date of engagement:		Amount to be paid:		
Chartfields: Fund:	Class:	Prog:	Proj/Grt:	
1. Is the total payment, including \$2,000.00 or more? If yes, do NOT contractor agreement.				YES NO
2. Is this a one-time, nonrecurring If no, do NOT proceed with this form. The applicable employment documents.	Process the payment on e	ither an independent c	ontractor agreement or	
3. Is the recommended individual TCNJ?				e of
If yes, do NOT proceed with this form.			<u>ient documents.</u>	
4. Is the recommended individual If yes, do NOT proceed with this form.			ent is not allowed.	
5. Is the recommended individual <i>If no, go to II. Foreign Nationals.</i>	al a U.S. citizen or lav	wful permanent res	dent (green card holder	r)?
II. Foreign Nationals				

Foreign nationals may not be contracted, paid, or reimbursed without documentation substantiating the individual's immigration status **prior to** the commencement of services. Payments to foreign national contractors are subject to 30% federal income tax withholding. All payments will be reported on Form 1042-S.



III. Terms and Signatures

1. INDEMNIFICATION AND HOLD HARMLE shall indemnify, defend, save and hold harmless T commissions, and its officers, officials, agents, and against any and all claims, actions, liabilities, dam and costs of claim processing, investigation and lit or personal injury (including death), or loss or dam caused, in whole or in part, by the negligent or will Speaker/Lecturer/Performer/Artist or any of its ow This indemnity includes any claim or amount arisi or arising out of the failure of such Guest Speaker/local law, statute, ordinance, rule, regulation or confidemnitee shall, in all instances, except for Claim of the Indemnitee, be indemnified Guest Speaker/lis agreed that Guest Speaker/Lecturer/Performer/Artist agrees to Jersey, its officers, officials, agents and employees Speaker/Lecturer/Performer/Artist for The College	the College of New Jersey, its of the employees (hereinafter referrances, losses, or expenses (incluigation) (hereinafter referred to hage to tangible or intangible plful acts or omissions of Guest or officers, directors, agent agent of or recovered under the Lecturer/Performer/Artist to court decree. It is the specific interest arising solely from the negligible ceturer/Performer/Artist from artist shall be responsible for purplicable. In consideration of waive all rights of subrogations for losses arising from services	departments, agencies, boards, ed to as "Indemnitee") from and ading court costs, attorneys' fees, as "Claims") for bodily injury roperty caused, or alleged to be s, employees or subcontractors. He Workers' Compensation Law conform to any federal, state or ention of the parties that the gent or willful acts or omissions and against any and all claims. It rimary loss investigation, defense the award of this contract, the in against The College of New
2. Guest Speakers/Lecturers/Performers/Artists voluntarily excluded from participation in this acti (Payment from federal funds is prohibited in such	s presently either debarred, sus vity by any Federal departmen	pended, declared ineligible, or t or agency should check here
3. This contract may be terminated at no cost to eit upon (30 days unless otherwise indicated).	,	DVANCE WRITTEN NOTICE
4. Guest Speaker/Lecturer/Performer/Artist is an in and federal taxes associated with this agreement. The parties. Time is of the essence in this agreeme	This agreement is the complete	
5. REQUIRED SIGNATURES (unsigned forms	will be returned to the depart	ment):
Independent contractor (print name)	Signature	Date
Dept Head/Project Director (print name)	Signature	Date
Department/Project Name	Room#	Phone #
Cabinet Member/Dean/Center Director (print)	name) Signature	Date
If funded by grant funds:		
Office of the Treasurer (print name)	Signature	Date
HR Use Only □ Request approved as an Independent Contractor □ Request does not meet the standard for payment as Human Resources for the purpose of hiring service process.		rtment notified to contact
Evaluator (print name)	Signature	Date