

Participant Agreement and Payment Request Form (Non-Mines Student)

I, _____ agree to participate in the _____ program.
(Participant Name) (Program Name)

Participant email _____

Participant's Status (choose one): U.S. Citizen or Permanent Resident Non-U.S. Citizen

NOTE: To be eligible to participate in federally funded REU or experiential programs, U.S. Citizenship or permanent residence may be required .

I understand the following **Program Requirements:**

As a participant of the program I understand the following **additional requirements** and confirm:

_____ *I understand the stipend and any other support recieved through this program is taxable income and will be reported to the IRS annually as follows: **Non-Resident Alien Participant:** May be subject to 30% withholding based upon tax treaty and reported on Form 1042-S. **All other Participants:** No withholding, reported on Form 1099 (if payments exceed \$600 in one calendar year).*

Stipend/Subsistence Allowance:

Total Amount \$ _____

Index: _____

Account Code: _____

Per Period Amount \$ _____

Participant Signature _____ **PI/Approver Signature** _____

ORA Signature (if applicable) _____ **Department Contact** _____
(please print)

For AP Use Only:

Banner I-Doc # _____

Processed by: _____

Date: _____

Approved By: _____

Date: _____