

**The Ohio State University
Compliance Form for Payments to B or W Visa Holders**

Requirements for B-1, B-2, WB and WT Visa Holders

Individuals may be required to complete this form to certify they have met certain restrictions in order to receive payment. Check the table to see whether this form is required.

Visa Type	Honoraria	Travel
B-1 or WB	Required	Not Required
B-2 or WT	Required	Required

Visitor Information

Last (Family) Name _____ First (Given) Name _____
 Social Security Number _____ or ITIN _____
 Dates of Activity for Which Visitor is Being Paid _____ Visa Status _____
 Briefly Describe the Activity _____

If you are Canadian, check box if you did not receive Form I-94 (Departure Record)

Certification

The American Competitiveness Workforce Act allows payment of honoraria and/or travel to B-1, B-2, WB and WT visa holders for qualified academic activity if all of the following criteria are met:

- (1) the payment is offered by an institution of higher education, a nonprofit research organization or a government research organization,
- (2) the visa holder cannot have accepted honoraria and/or incidental expenses (including travel expenses) from more than five such institutions or organizations in the previous six month period, and
- (3) the activity does not exceed nine days at a single institution.

Statement of Visitor: I attest that I have been engaged in academic activities for the benefit of The Ohio State University for any portion of nine days or less, and that I have not been paid or reimbursed by more than five other US institutions/organizations during the past six months.

Signature _____ Date _____

Statement of Department Head or Account Manager: As sponsor of the above individual, I attest that the individual has been engaged in the academic activities for the benefit of The Ohio State University for any portion of nine days or less, and that the activities for which the individual is paid or reimbursed are within the broad realm of customary academic activities associated with teaching, research, public service or academic administration or operations.

Signature _____ Date _____ Department _____

Directions

Attach this form to the OSU Payment Request Form. A photocopy of the passport and the I-94 (for the current trip) must also accompany the payment request. If the payment request is for reimbursement of travel expenses, attach original receipts. If the payment request is for honoraria and the visitor is requesting tax treaty benefits the individual must be directed through the GLACIER system. All payments are subject to standard university policies and procedures.