



Certification of Academic Activity

Please check one: State Stony Brook Foundation Research Foundation

The American Competitiveness Workforce Act of 1998 allows payment of honoraria and associated incidental expenses to B-1, B-2, WB and WT visa holders for "usual academic activity," if paid by a United States institution of higher education, a nonprofit organization affiliated with an institution of higher education, or a nonprofit or a governmental research organization. Under the Act, an academic activity may not exceed nine days at a single institution. In addition, such visa holder cannot accept honoraria and/or incidental expenses from more than five such institutions or organizations in the previous six month period.

Payment Requirements:

Honoraria

B-1, B-2, WB, and WT visa holders may be paid an honorarium for usual academic activity *not exceeding nine days* in duration, provided that such individual has not received honoraria from more than 5 educational institutions in the previous six-month period.

Travel and Incidental Expenses

B-1 and WB visa holders may be reimbursed for reasonable travel and incidental expenses incurred in connection with a usual academic activity, regardless of the duration of the activity and regardless of whether the individual has previously received payment from other educational institutions.

B-2 and WT visa holders may be reimbursed for reasonable travel and incidental expenses incurred in connection with a usual academic activity *not exceeding nine days* in duration, provided that such individual has not received travel and incidental expenses from more than 5 educational institutions in the previous six-month period.

Visitor Information:

Last Name: _____ **First Name:** _____

Social Security Number or Individual Taxpayer Identification Number: _____

(In order to receive an honorarium payment you must have a Social Security or Individual Taxpayer Identification Number.)

What type of payment will you be receiving?

Honorarium Travel Expenses Both

Enter the visa Classification under which you are currently present in the United States: _____

The dates of my activity at Stony Brook University will be from: ____/____/____ to ____/____/____

Please indicate the type of activity you will be engaged in while at the University:

Guest Lecturer Conference Participant Researcher Other: If other, please describe: _____

Acknowledgement and Certification:

I have accepted an invitation by Stony Brook University for the purpose of engaging in a usual academic activity. I acknowledge I will receive an honorarium payment and/or reimbursement of travel and incidental expenses for my academic activity in accordance with the above payment requirements.

I certify that the information I have provided on this for is to the best of my knowledge and belief, true and complete.

Signature of Nonresident Alien: _____ **Date:** ____/____/____