

Texas Tech University School of Music
Request for Payment to an Individual or Agent of the Payee

PART A: TO BE COMPLETED FOR EACH PAYEE

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| Name of individual or firm that is to receive the payment: | |
| Social Security or Taxpayer ID #: | |
| School of Music Organization: | |
| Charge to Account: | |
| Event Sponsor (Faculty/Staff): | |

Signature

Date

To pay a **Current Employees of TTU (Faculty/Staff/Teaching Assistant/Research Assistant/Graduate Part-time Instructor)**, complete **Parts A and B**.
 To pay a **Student Assistant, Graduate Assistant (not TA/GPTI) or Temporary Part-time Student Worker**, complete **Parts A and D**.
 To pay **any other individual or a contractor's agent**, complete **Parts A and C**.

****THIS IS AN INTRADEPARTMENTAL FORM! DO NOT SEND IT TO THE PAYEE! ****

PART B: Complete for a payee who is a CURRENT EMPLOYEE OF TEXAS TECH (any department)

Description of service to be performed: _____

Number of hours worked: _____ What is the benefit of this work to the department? _____

Justification for the work performed: _____

Why does this work not fall within the job description of this or another employee? _____

PART C: Complete for ANY NON-EMPLOYEE

Pay to the individual Pay to an agent. **Is the person a U.S. citizen?** YES NO

If the individual payee is not a U.S. Citizen please complete a, *Request for Employment or Visit of a Foreign National* and submit it to the TTU Office of International Affairs for approval before submitting this payment request to the School of Music. The School of Music cannot process payments to individuals who are not U.S. citizens without the prior approval of the Office of International Affairs.

Payee's Address: _____

Telephone: (____) _____ Fax: (____) _____ email: _____

Has the person been paid as an employee of TTU during the current calendar year? Yes No

Description of service to be performed: _____

Indicate the pay arrangement: Lump Sum, Hourly Wage, Piecework, Other): _____

Dates on which work will be performed: _____ Amount to be Paid: Fee: \$ _____

Hotel: _____ Airfare: _____ Mileage: _____ Total Committed: _____

Please provide the dates on which we will be paying for lodging: Check-in date: _____ Check-out date: _____

PART D: Complete for STUDENT ASSISTANT, GRADUATE ASSISTANT OR A TEMPORARY PART-TIME STUDENT WORKER

Immediate supervisor: _____

Description of work to be performed and special notes: _____

Authorized number of Hours Per Week: _____ Beginning Date: _____ Ending Date: _____

Authorized for the School of Music by: _____ Date: _____