HOW TO RECEIVE YOUR JAMES MADISON UNIVERSITY COOPERATING TEACHER HONORARIUM

Thank you for hosting a James Madison University student teacher. Please complete the following after the first 2 weeks of student teaching:

**Electronic signatures are unacceptable**

- Complete the [Honorarium Verification Form](#).

- Complete the [W-9 form](#) if you haven’t completed one for us in the past or your name has changed. See directions below.

- **For faster payment**, sign up for direct deposit (ACH payment). Complete the Electronic Vendor Payment Options [form](#). You will also need to submit a W-9 form regardless of if you have submitted one in the past. NOTE: if you put your email address in the “Remit Email” line on the form, you will receive an email when payment has been sent.

- **Return** the above forms by email ([teacher-ed@jmu.edu](mailto:teacher-ed@jmu.edu)), fax (540-568-3342), or U.S. mail to:
  
  Education Support Center  
  MSC 6915  
  James Madison University  
  395 South High Street  
  Harrisonburg, VA 22807

- **NOTE:** Due to budgetary constraints, we will not be able to process any honorarium requests after December 30 (for fall placements) and May 15 (for spring placements).
Honorarium Verification

*Submit an honorarium verification form for each student teacher you host.
*Please update or add information as necessary.

Name:

SSN:

Preferred First Name:

Home Address, City, State, Zip:

Email Address:

School:

Division:

School Address:

School Phone:

Current Teaching Assignment:

Student Teacher:

University Supervisor:

Block:

Year:

Signature: _____________________________________________________

Background Information

Highest Degree Earned:

Endorsement (Grade Level/Subject):

Number of Student Teachers You Have Had (from any institution):

Total Years of Experience:

Gender:

Birth Date:

TAXABLE INCOME:

Honoraria are considered taxable income and will be reported to the IRS and to the state. You are responsible for reporting this income and for payment of any income or self-employment taxes.
Instructions for Completing a Commonwealth of Virginia Substitute W-9 Form

1. Tax Identification Number:
   a. Check the box next to Social Security Number and provide the number on the dotted line.

2. DUNS Number: Not applicable (this is only for businesses, not individuals)

3. Legal Name:
   a. Full legal name of individual. This name must be exactly what is on an individual’s federal tax documents.
   b. For an individual, the first, middle, and last name should be included. If four names then clearly specify whether it is two last names or two middle names and also whether any names are hyphenated.

4. Business Name:
   a. As you are completing this form for an individual (yourself), the business name is not applicable.

5. Entity Type
   a. This is Individual.
6. **Entity Classification**  
   a. This is Professional Services.

7. **Exemptions:**  
   a. You may claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners’ share of effectively connected income, and certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

   b. **What is FATCA reporting?** The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting.

8. **Legal Address:** Enter your legal address, as recognized by the U.S. Postal Service.

9. **Remittance Address:**  
   a. For payments, use the full mailing address as recognized by the U.S. Postal Service.
   b. If an additional address line uses a unit indicator, the unit type should be specified (e.g. APT, STE, BLDG, RM, etc.).

10. **Name:** Individual’s name.

11. **Email Address:** A contact email address should be provided.

12. **Business Phone:** A contact phone number should be provided.

13. **Fax Number, Mobile Phone, Alternate Phone:** A fax number, mobile phone, or alternate phone number can be provided here, if applicable.
14. **Printed Name:** The individual’s name should be printed here.

15. **Authorized U.S. Signature:** The form must be signed. Electronic signatures or typed signatures will not be accepted.

16. **Date:** The date the form is signed should be provided.

**ADDITIONAL NOTES**

- Write legibly in pen (blue or black ink only) when completing a handwritten form.
- For forms prepared on the computer, remember to print, sign and date the form in pen before sending. Signature and date should be in blue or black ink only.
- If highlighting, only use a yellow colored highlighter. All other colors cause the writing to become unreadable when scanned.