

## Participant support certification

This form documents the non-compensatory nature of participant payments made to or on behalf of participants in a conference, seminar, symposia, workshop or other short-term training or information-sharing activity. Participant expenses are incurred solely to fulfill the goals of a specific project. Participant expenses are usually travel costs associated with attending conferences, seminars, symposia, workshops or other short-term training or information-sharing activities.

Participants are not required to perform services other than attending and being engaged in the event or activity. Participants may be trainees where the participant is the primary beneficiary of the event or activity, instead of ASU or a third party. Trainees are distinct from interns in that interns provide services to ASU or a third party and must be paid through the ASU payroll system.

ASU employees who are participants must be paid any participant stipend through the ASU payroll system unless the employee is a student or graduate and is not employed by the same department paying the support. For assistance in determining what constitutes services, please review the guidelines provided by ASU Financial Services in the <u>stipend guide</u> and <u>FIN 422-01</u>.

Participant's name	Supplier number or ASU ID
Stipend amount	Mailing address for payment
Reimbursement amount	
Will the individual be physically present in the U.S	during this program or activity?
Yes. No. Please provide the country where the	individual will be participating:
If the individual will be in the U.S., are they consid U.S. citizens, permanent residents and individuals substantial presence test.	lered a resident for U.S. tax purposes? This includes who have passed the Internal Revenue Service
Yes.  No. Attach the Alien Data Collection form summary if the individual has an active Alien	with the associated attachments or a current Glacier SU Glacier account. *
	tivity may have up to 30% of their participant support will be reflected on a 1042-S IRS form issued following
Participation certification	
I certify that the above information is true and acc required to perform services as a condition of rece	
Participant signature	Date

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## Participant support certification

## Department certification — to be completed by an authorized departmental representative

This payment is for a stipend or expense reimbursement to a participant who is not an ASU employee in a project where no services — including research-related services — are required to receive payment in connection with the activity.	
Department	Department representative's name*
Signature	Date

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<sup>\*</sup>The department representative should be the principal investigator or cost center manager.