



# University of Waterloo Casual/Additional Pay Request

For HR Use Only:  
Pay Group: \_\_\_\_\_  
Dept ID: \_\_\_\_\_

**CHEQUE:** Mail  Pick-up in HR

If no selection is made the cheque will be mailed.

**DIRECT DEPOSIT:**  Ensure a Direct Deposit form is included

**OR**

**WIRE TRANSFER:** Specify payment currency \_\_\_\_\_

Please complete and attach an *Outgoing Wire Payment Request Form*, available on the Finance website. Wire transfers are not an option for payments in Canadian or US funds.

## ISSUING DEPARTMENT INFORMATION

Department Contact Name:	Phone Extension:
Department:	4 Digit Department Org Number:

## PERSONAL INFORMATION

First Name(s):	Initial(s):	Last Name:	Date of Birth: ____/____/____ (mm/dd/yy)
Employee ID (if known):	Gender: Male <input type="checkbox"/>	Social Insurance Number (SIN): if Non-Resident, leave blank	SIN Expiry Date (if begins with '9'): ____/____/____ (mm/dd/yy)
Student ID (if applicable):	Female <input type="checkbox"/>		

## PERMANENT ADDRESS (for purposes of mailing T4A/T4A-NR- Department address not accepted)

Street Number and Address:	Apt Number:	City:
Province/State/Territory:	Postal Code:	Country:

## ADDITIONAL INFORMATION FOR NON-RESIDENTS ONLY

Individual Tax Number or Foreign Social Security Number:	Number of days Individual in Canada in Current Tax Year <u>    </u> <b>or</b> Work Performed Outside Canada <input type="checkbox"/>	Date(s) work performed: _____
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### CASUAL EMPLOYMENT EARNINGS

These earnings will be reported on a T4.

Hourly Rate:

\$

Hours Worked:

Gross Earnings (Rate x Hrs Worked)

\$

Vacation Pay (4% of Gross Earnings)

\$

**OR**

### RESIDENTS - NON-EMPLOYMENT PAYMENTS

Record the amount to be paid in the AFF section

These payments will be reported on a T4A.

- |                          |                            |            |
|--------------------------|----------------------------|------------|
| <input type="checkbox"/> | Award or Prize             | <b>AWP</b> |
| <input type="checkbox"/> | Fee for Service            | <b>FEE</b> |
| <input type="checkbox"/> | Guest Lecturer/Speaker     | <b>GLC</b> |
| <input type="checkbox"/> | Honorarium                 | <b>HEX</b> |
| <input type="checkbox"/> | Living Allowance           | <b>LAL</b> |
| <input type="checkbox"/> | Professional Artist Fee    | <b>PAF</b> |
| <input type="checkbox"/> | External Reviewer/Examiner | <b>REP</b> |
| <input type="checkbox"/> | Research Participant       | <b>RPT</b> |
| <input type="checkbox"/> | Royalties                  | <b>RYN</b> |
| <input type="checkbox"/> | Other _____                |            |

**OR**

### NON-RESIDENTS - NON-EMPLOYMENT PAYMENTS

Record the amount to be paid in the AFF section

Where work is performed in Canada, Income Tax will be deducted as per subsection 105(1) of the Revenue Canada Taxation Act and the payment will be reported on a T4A-NR

- |                          |                            |            |
|--------------------------|----------------------------|------------|
| <input type="checkbox"/> | Consulting                 | <b>FNR</b> |
| <input type="checkbox"/> | Fee for Service            | <b>FNR</b> |
| <input type="checkbox"/> | Guest Lecturer/Speaker     | <b>GLN</b> |
| <input type="checkbox"/> | Honorarium                 | <b>HNR</b> |
| <input type="checkbox"/> | Living Allowance           | <b>LNR</b> |
| <input type="checkbox"/> | External Reviewer/Examiner | <b>RPN</b> |
| <input type="checkbox"/> | Royalties, Non-Resident    | <b>RNR</b> |
| <input type="checkbox"/> | Other _____                |            |

## DESCRIPTION OF WORK PERFORMED (or attach supporting documentation)

**ACCOUNT AND POSTING ATTRIBUTE AUTHORIZATIONS:** If any research accounts in Fund 105 are being charged, a Research Financial Compliance & Eligibility Stamp is required.

Where Account 50210 Salary-Research Assistants is used with Fund 105, a Student Type code is required, otherwise, leave this field blank. Valid Student Types are:

- |                       |                            |
|-----------------------|----------------------------|
| 10 Masters Domestic   | 11 Masters International   |
| 12 Doctoral Domestic  | 13 Doctoral International  |
| 14 Undergrad Domestic | 15 Undergrad International |

ACCOUNT	WORKORDER	ACTIVITY	STUDENT TYPE	AMOUNT	CURRENCY (if not CND)
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AUTHORIZATION:

Name

Signature

DATE

ACCOUNT	WORKORDER	ACTIVITY	STUDENT TYPE	AMOUNT	CURRENCY (if not CND)
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AUTHORIZATION:

Name

Signature

DATE

For audit purposes, please keep a copy of the approved form for departmental records. Submit the completed original to Human Resources, Payroll in EC1