Limited Engagement Agreement Services within U.S. - Nonresident Aliens





			Today's Date:
Limited Engagement Fee is a payment to an individual (a hort duration, typically less than 30 days, and/or low dol ntended for guest speakers, guest lecturers, artists, perfud/or those services meeting the fee guidelines. It is not roperty damage. For these high- risk engagements required.	Illar amount (\$1,000 or less formers, writers/editors, bo designed for engagements	per transaction; \$ ard members, critical that create a mater	5,000 per year max). This is ics, preceptors, and mentors rial risk of physical injury or
ervice Provider Information Legal Name of Individual			
Permanent residence/address (street, apt. or suite no., or	r rural route)		
City or town, state or province. Include postal code whe	ere appropriate.	C	ountry
Email		Phone Number	
nformation and Documentation Requiremen	nts		
DENTIFICATION DOCUMENTATION REQUIRED: W-		ort and I-94 Depart	ure Record.
ax Residency Status			
HAT COUNTRY DID YOU LIVE IN PRIOR TO THIS	U.S. VISIT?		
D YOU PAY TAXES AS A RESIDENT OF THAT COU	~		- 0
D YOUR TAX RESIDENCY IN THAT COUNTRY EN			
YES, DATE THAT TAX RESIDENCY ENDED			
mmigration Status			
ISA type:	Issue Date:		Expiration Date:
ave you ever had another immigration status in the U.S.? ave you ever been present in the U.S. prior to this visit?	\sim		
his agreement is made by and between the Tru	ustees of the Universi	ty of Pennsylva	ınia, a Pennsylvania tax-exempt
lucational corporation ("University"), and			
Individual"), and is effective as of this day of	f		·
ne parties agree as follows:			
1. ENGAGEMENT: Individual will pr	rovide service on		date(s).
2. DESCRIPTION OF SERVICES:			
3. LOCATION OF SERVICES:			

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4.	report U.S. federal income tax on be must be included on the invoice. Ef Pennsylvania state tax on non-em non-Pennsylvania residents, and would be issued a 1042-S and wou	rill pay Individual the sum of \$e payment terms. If required, the Universal of the individual unless covered fective January 1, 2018, the Universal ployee compensation payments to in who are performing services in Penald not be subject to PA tax withhold withholding requirements on inco	under a tax treaty. Travel expenses sity is required to withhold ndividuals who are resident aliens nsylvania. A nonresident alien lding. The University will comply
5.	SERVICE PROVIDER: Individu service provider and not as an employee	al will be participating in the Engagen loyee of the University.	ment as an individual
6.	SERVICE PROVIDER attests the University of Pennsylvania, Heal	y are <u>not an enrolled student or an e</u> th System, or any of its affiliates.	employee of the
authoriz COMPL	NESS WHEREOF, the parties hereto ed representatives as of the date first ETE, TRUE, and CORRECT to the b have indicated on this form, I must su	set forth above. I hereby certify that a est of my knowledge. I understand that	Il of the above information is at if my status changes from that
Signatu	res		
Service l	Provider		
Print	Name	Title	
Date		Signature	
	nce Specialist Approval for The Truste Name	es of the University of Pennsylvania	
Print	Name		

Signature

Date