# Honorarium Information

***(Appendix F)***

Please select the appropriate payment section and complete accordingly (select both for full placement).

£ Fall Term (Year) £ Winter Term (Year)

|  |  |  |  |
| --- | --- | --- | --- |
| **Student:**  |  | **Supervisor:**  |  |
| **Practicum Site:**  |  |

Upon satisfactory completion of the practicum and submission of final grades by the due date, a $500.00 CAD honorarium will be paid. Instances of co-supervision will result in the honorarium being pro-rated. If the Supervisor or Agency terminates the practicum, no honorarium payment will be made. If the student withdraws from the practicum, upon documentation from the Supervisor/Agency of any supervision/preparation that took place, a pro-rated honorarium will be paid. If the student withdraws from the practicum prior to any supervision/preparation no honorarium will be paid.

£ **NO HONORARIUM REQUIRED *(No other information required)***

£ **SUPERVISOR** *(Deductions will be made according to Canada Revenue Agency)*

|  |  |  |  |
| --- | --- | --- | --- |
| Last Name:  | First Name:  | Phone:  | E-mail:  |
| Permanent Address: |
| *Street* |
|  |
| *City Province Postal Code* |
| Date of Birth: (dd/mm/yy) | Social Insurance #: | Gender:£ Male£ Female | Canadian Citizen£ Yes£ No | Landed Immigrant£ Yes£ No |

£ **INCORPORATED FIRM / AGENCY / OTHER (e.g., CHARITY)**

|  |
| --- |
| Payee Name:  |
| Payee Mailing Address for cheque: |
| *Street* |
|  |
| *City Province Postal Code* |
| £ GST/Revenue Canada Business Number: # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Tax ExemptStatus£ Yes£ No |
| If no GST number established:£ Corporate Registration Number # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_£ Society Registration Number # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_£ Charity Registration Number # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| If you have any questions please contact:Email: edu.masters@uleth.ca Phone: 403-329-2425 Toll Free: 1-800-666-3503 |