

1121 Biology-Psychology Building 4094 Campus Drive College Park, Maryland 20742-7255 301.405.5862 TEL 301.314.9566 FAX

Department of Psychology

Honorarium Agreement

_	ifirms the Department of Psychology's invitation to you to
present a	(lecture/seminar/colloquium) on (date)
on the subject	
at the University of Maryland,	ollege Park.
We have offered you an honorarium of \$ Your travel expenses will be supported through an approved Travel Request and will be processed by the Department. Therefore, this honorarium only covers payment for your lecture, seminar or colloquium. If this arrangement is satisfactory to you, please return a copy of this letter with your signature and the indicated information below so that we may request your honorarium check.	
Department Signature	Name and Title
Agreed:	
Signature of Speaker	Date
Speaker's Social Security Number or	ISA Number for Non-US Citizens – Please attach a copy of your VISA
Speaker's Position or Title	Speaker's Institution
Speaker's Home Mailing Addre	