



# MOLLOY COLLEGE

P.O. Box 5002  
1000 Hempstead Ave  
Rockville Centre, NY 11571-5002

## REQUEST FORM FOR HONORARIUM

Please submit at least two weeks prior to presentation date to allow processing by the Accounting Department

Employee of Molloy?  Yes  No

*\*\*\* Any employee of Molloy must be paid through the payroll department, all others are paid through accounts payable*

DATE OF REQUEST: \_\_\_\_\_

REQUEST MADE BY: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

DATE / DATES OF PRESENTATION: \_\_\_\_\_

TOPIC: \_\_\_\_\_

It is important to procure the following information from your speaker in order to assure prompt payment.  
Please note this form must be attached to an accounts payable check request.

NAME: \_\_\_\_\_

COMPANY / AFFILIATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

HONORARIUM AMOUNT: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_