



UNIVERSITY of HAWAI'I*
FOUNDATION

CERTIFICATION OF ACADEMIC ACTIVITY FOR TRAVEL REIMBURSEMENT TO A NONRESIDENT ALIEN

NOTE: This form must be accompanied by 1) letter of invite, 2) travel itinerary, 3) receipts, 4) I-94 OR copy of current passport with photo, 5) Form W-8BEN. Documents with sensitive information should be transmitted through UHF's secure file sharing site at <https://www.uhfoundation.org/payment-request-documents-upload>

The American Competitiveness Workforce Act of 1998, which amends The Immigration and Nationality Act of 1952, allows payment of travel and incidental expenses to B-1, B-2, WB, and WT visa holders for "usual academic activity," if paid by an institution of higher education, a nonprofit organization affiliated with an institution of higher education, or a nonprofit or a governmental research organization. Per the immigration law, the University may make payment of travel and incidental expenses to B-1, B-2, WB, and WT visa holders under the following requirements:

Travel and Incidental Expenses

- **B-1 and WB visa** holders may be reimbursed for reasonable travel and incidental expenses incurred in connection with a usual academic activity, regardless of the duration of the activity and regardless of whether the individual has previously received payment from other educational institutions.
- **B-2 and WT visa** holders may be reimbursed for reasonable travel and incidental expenses incurred in connection with a usual academic activity not exceeding nine days in duration, provided that such an individual has not received travel and incidental expenses from more than five educational institutions in the previous six-month period.

Visitor Information

Last Name: _____ First Name: _____

Enter the visa classification under which you are currently present in the United States: _____

The dates of my activity at the University of Hawai'i will be from _____ to _____

Please select the type of activity you will be engaged in while at the University:

Guest lecturer Conference participant Researcher Other: If other, please describe below:

Acknowledgement & Certification

I have accepted an invitation from the University of Hawai'i for the purpose of engaging in a usual academic activity. I acknowledge I will receive a reimbursement of travel and incidental expenses for my academic activity in accordance with the above payment requirements.

I certify that the information I have provided on this form is to the best of my knowledge and belief, true and complete.

Signature of Visitor/Nonresident Alien

Date (MM-DD-YYYY)