Instructions for Completing the Stipend Paperwork

In order to receive your stipend for working with one of our student teachers or interns this semester, you must complete the two attached forms and return them to the Teacher Licensure Office. The stipend request and W9 must be completed in full (signature required on both forms and SSN required on the W9) and returned as noted below. If you are not a US citizen, please submit the W8BEN in lieu of the W9. Due to privacy regulations these forms should not be sent via e-mail or fax. Please mail to the following address:

Teacher Licensure Office  
Liberty University  
Box 710098, 1971 University Blvd.  
Lynchburg, VA 24515

As soon as the stipend forms are received, an e-mail confirmation will be sent to the e-mail on the stipend form. At the end of the semester, a requisition will be submitted to Accounts Payable. The stipends will be mailed from Accounts Payable to the resident address written on the W9 form. Please make sure you have answered all questions and have signed both forms.

If you do not wish (or are not permitted) to receive the stipend for your mentoring services, please make a note on the completed stipend information form and mail it without the other documents. A signed W9 or W8BEN is required in order to receive a stipend from Liberty University.

Nancy L. Hesse  
Licensure Manager  
School of Education  
teacher@liberty.edu  
(434) 582-2632
**School Mentor Information and Stipend Request**  
(School mentor = cooperating teacher or internship mentor)

<table>
<thead>
<tr>
<th>School Mentor:</th>
<th>Semester: Fall _____ Spring _____ Summer_____</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-Mail:</td>
<td>School:</td>
</tr>
<tr>
<td>Mentor’s Mailing Address:</td>
<td>Student Teacher or Intern’s Name:</td>
</tr>
</tbody>
</table>

Please initial below confirming you have completed the following mentor requirements:

- I have viewed the mentor training video provided by the LU School of Education at: [https://sites.google.com/site/lueducationhelp/home/](https://sites.google.com/site/lueducationhelp/home/)
- I have/will complete the demographic information and the other required assessments in the FEM (Field Experience Management) on Live Text.
- If I am outside of the state of Virginia, I have attached a copy of my current license or certification with this stipend form.

Yes | No |
--- | --- |
I am also an employee of Liberty University during this current reporting year.

Each mentor receives a stipend of $200 for a 15 week student teacher/internship placement or a $100 stipend for a 7 ½ week student teacher/internship placement. Please indicate if you are mentoring this candidate for a 15 week or 7 ½ week placement.

| Stipend: | $200.00 for 15 week placement | $100.00 for 7 ½ week placement |
--- | --- | --- |

The stipend is paid at the end of the semester upon receipt of all paperwork (this signed contract and the W9 or W8BEN form). Your SSN is required on the W9 and your signature must be on both documents in order for the stipend to be released from Accounts Payable. At the end of the semester, the stipend check will be mailed to the address that is noted on the W9 or W8BEN form.

The following information is requested for compliance with licensure standards and is used for data recording only:

<table>
<thead>
<tr>
<th>Gender:</th>
<th>Ethnicity:</th>
<th>US Citizen: (if No, then the W8BEN form must be submitted in lieu of the W9.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endorsement area(s) (must match student teacher or intern):</td>
<td>Grades/Subjects currently employed:</td>
<td></td>
</tr>
<tr>
<td>Degree(s):</td>
<td>Institution for each degree:</td>
<td></td>
</tr>
<tr>
<td>Years of teaching and/or school personnel experience (3 years minimum):</td>
<td>Number of student teachers or interns previously mentored:</td>
<td></td>
</tr>
<tr>
<td>Other professional experience (professional memberships, conferences attended, presentations, publications):</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Required signature of School Mentor:** ____________________________________________

Please mail the required forms to:  
Teacher Licensure Office, Liberty University  
Box 710098, 1971 University Blvd., Lynchburg, VA 24515  
Revised April 2015
Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

For use by individuals. Entities must use Form W-8BEN-E.

Information about Form W-8BEN and its separate instructions is at www.irs.gov/formw8ben.

Give this form to the withholding agent or payer. Do not send to the IRS.

Do NOT use this form if:
• You are NOT an individual.
• You are a U.S. citizen or other U.S. person, including a resident alien individual.
• You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the U.S. (other than personal services).
• You are a beneficial owner who is receiving compensation for personal services performed in the United States.
• A person acting as an intermediary.

Instead, use Form:
• W-8BEN-E
• W-9
• W-8ECI
• 8233 or W-4
• W-8IMY

Part I
Identification of Beneficial Owner (see instructions)

1. Name of individual who is the beneficial owner

2. Country of citizenship

3. Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.
   City or town, state or province. Include postal code where appropriate.

4. Mailing address (if different from above)
   City or town, state or province. Include postal code where appropriate.

5. U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)

6. Foreign tax identifying number (see instructions)

7. Reference number(s) (see instructions)

8. Date of birth (MM-DD-YYYY) (see instructions)

Part II
Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9. I certify that the beneficial owner is a resident of within the meaning of the income tax treaty between the United States and that country.

10. Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article of the treaty identified on line 9 above to claim a % rate of withholding on (specify type of income):

    Explain the reasons the beneficial owner meets the terms of the treaty article:

Part III
Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

• I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income to which this form relates or am using this form to document myself as an individual that is an owner or account holder of a foreign financial institution,
• The person named on line 1 of this form is not a U.S. person,
• The income to which this form relates is:
  (a) not effectively connected with the conduct of a trade or business in the United States,
  (b) effectively connected but is not subject to tax under an applicable income tax treaty, or
  (c) the partner’s share of a partnership’s effectively connected income,
• The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country, and
• For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.

Sign Here

Signature of beneficial owner (or individual authorized to sign for beneficial owner)

Date (MM-DD-YYYY)

Print name of signer

Capacity in which acting (if form is not signed by beneficial owner)

For Paperwork Reduction Act Notice, see separate instructions.