Foreign Individual Vendor Request Form

Foreign Individual Section

In order to set you up as a payment recipient for Harvard University, please complete the information below: *Please fax or mail this information or not email this information since it is considered high risk confidential information.*

Please note that all fields are REQUIRED				
1. Your Name:				
First:	Middle:		Last:	
2. Your Identification Number:				
SSN or ITIN (if none, enter N/A):				
3. Your Mailing Address:				
US Address:				
City:	_State:	e: Zip Code:		
Foreign/Permanent Address:				
City: Postal	Code:	Country:	Prov	vince:
4. Your Preferred Email: Email Address:				
5. Your Visa Type:				
Visa Type: or No Entry – check this box if not entering the U.S.				
Please return this document to:				
Attn: Department Administrators: This form is for use by local departments to a retained in the local department or sent to the confidential information – departments sho longer needed.	ne NRA Tax Office. Thi s	s form contains SSN/IT	TIN data that is conside	ered high risk

After your information is entered into Harvard's payment system, you will receive an email from support@online-tax.net with the subject line "Payments from Harvard University". The email will contain login information to GLACIER, an online tax compliance program. You will need to login, complete the program, and return the completed forms along with copies of your visa documents to Harvard in order to receive payments.