

**HEALTH SCIENCE CENTER HANDBOOK OF OPERATING PROCEDURES**

|                      |   |                 |   |
|----------------------|---|-----------------|---|
| Chapter 6            | Fiscal Policies and Procedures  | Effective:      | May 2000                                      |
| Section 6.2          | Travel Policies and Procedures  | Revised:        | September 2008                                |
| <b>Policy 6.2.10</b> | <b>Authorization to Travel for Consultants and for Services Performed by Persons Other Than Employees</b> | Responsibility: | Assistant Vice President for Business Affairs |

## **AUTHORIZATION TO TRAVEL FOR CONSULTANTS AND FOR SERVICES PERFORMED BY PERSONS OTHER THAN EMPLOYEES**

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### **Policy**

In order to have travel approved for prospective employees, employees of other State of Texas agencies, and other official travelers, a [Prior Approval](#) (payment request form for approval of payments to consultants or for services performed by persons other than employees) must be completed.

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### **Documentation Required**

Allow five working days prior to the beginning dates of service for processing. The following items on the [Prior Approval](#) form must be completed:

1. U.S. Non-Resident: If yes, put country of citizenship and contact Office of International Services for information on immigration and Federal income tax matters.
2. Former UTHSCSA Employee--Yes/No: If yes, and paying from State funds, payment may not be made to an individual who was employed by the University during the 12 months prior to date service rendered.
3. Is This Payee Related by Blood or Marriage to a Regent, Official, or Employee of The University of Texas System--Yes/No: If yes, give name and relationship.
4. Name: Name of person.
5. DOB: Date of birth of individual (required for sanction checks).
6. SSN: Social security number of payee. This number must be included.
7. Address: Home address of payee.

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8. Permanent Mailing Address for Purpose of Mailing Internal Revenue Service (IRS) 1099 or IRS 1042S Information Return: Permanent address of payee if different from address already given above.
  9. Title and Qualifications of Payee--List title and qualifications: "N/A" is not acceptable.
  10. Employer and Address: Name and address of payee's employer. If self employed, note this and include address.
  11. Dates of Service: Beginning and ending dates of service.
  12. Department Requesting Service: Name of Department.
  13. Prepared By: Name of person preparing form.
  14. Responsible Faculty/Staff Member: Name and phone number of responsible faculty/staff member.
  15. Phone No.: Phone number of preparer.
  16. Source of Funds (Project ID Number): Must be valid for time of dates of service above.
  17. If Grant or Contract, Has Certification Been Complied With? Yes or No: If yes, include statement on voucher. Only applicable if paying from grant accounts.
  18. Complete Fee Section for Consultant or Personal Service Fee, Transportation, Meals and Lodging, etc.: If the actual amount exceeds the line estimate by more than 20%, a revised [Prior Approval](#) form reflecting the increase must be submitted with the voucher.
  19. Complete Description of Work to Be Performed: Detailed description of consultation area or service.

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- 20. Business Travel Account (BTA) If Applicable: Indicate if air travel is involved and if department wishes to prepay the airline ticket charges. See [Section 6.2.13](#), of the *Handbook of Operating Procedures* (HOP), “Purchase of Airline Tickets for Official Visitors”, for detailed information.
  
  - 21. Complete and attach [Employee/Independent Contractor Classification Checklist](#).
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**Approvals  
Required**

The completed [Prior Approval](#) is signed by an authorized signatory for the project ID; the signature must be on file in DCATS. The Chair or the Director then signs the form; if that signatory is the same as the signatory on the account, sign twice.

Retain the gold copy for department files. Forward the white and yellow copies to either the Executive Vice President for Business Affairs or the Office of Sponsored Programs (grant funds only). After signed and approved, the white and yellow copies will be returned to the department. Submit the white copy with the voucher for consultant fee, meals, lodging, and any other business expenses.

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