

CAL STATE LA UNIVERSITY AUXILIARY SERVICES, INC.

5151 State University Drive, GE 310 Los Angeles, California 90032

Tel: 323.343.2530 Fax: 323.343.5915

Non Resident Alien Notification Form

All fields must be completed	
	Payee Information
Last Name:	
	Middle Name:
	n email that you access on a daily or frequent basis. Please print clearly.
Check One:	☐ Faculty/Staff/GA ☐ Consultant ☐ Student Assistance Department:
Cal State LA UA provided. This in Internal Revenue and reporting of p	AS, Inc. can not issue payments to you until information regarding your immigration status is formation will be used to determine your correct withholding allowances for taxation purposes. The Service (IRS), the U.S. government tax authority, has issued strict regulations regarding the taxation ayments made to non-United States citizens. As a result, Cal State LA UAS, Inc. may be required necome tax and file reports with the IRS in connection with any payments made to you.
GLACIER Online to log on to the sy complete the nece	s, you will receive an email message at the email address you provided, notifying you to log on to the Tax Compliance System. The email will contain the Institution ID and your password required estem. For your convenience, Cal State LA UAS, Inc. allows you to provide information and essary forms via the internet from any web-accessed computer. YOU MUST LOG ON TO THE INE TAX COMPLIANCE SYSTEM AND PROVIDE THE REQUESTED INFORMATION
	if I do not provide the requested information, Cal State L.A. UAS, Inc. is unable to honor th ption and other terms of my tax treaty. The maximum amount of U.S. tax will be withheld from an
Signature:	Date:
If you have quest at acontr134@ca	tions: Contact Financial Reporting Accountant, Alberto Contreras at (323) 343-3568 or email lstatela.edu.
For office use only	y
Tax Administrator:	Date Received
Date Email Notific	ation/Password sent: