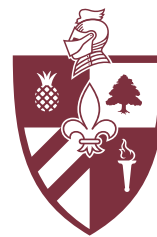


# Diversity, Equity and Inclusion Guest Lecture Stipend Form



BELLARMINE  
UNIVERSITY  
IN VERITATIS AMORE

Today's Date: \_\_\_\_\_

Person Making Request: \_\_\_\_\_

Date(s) of Speaking Engagement(s): \_\_\_\_\_

Location(s) of Speaking Engagement(s): \_\_\_\_\_

Topic:

## PAYROLL INFORMATION

Account Number: \_\_\_\_\_ Account Approval: \_\_\_\_\_

*Dr. Donovan, Lucy Burns or DJ Mitchell*

Name of Speaker/Employee: \_\_\_\_\_

Speaker's Employee ID: \_\_\_\_\_

Stipend Amount\* Requested (\$75/class maximum): \_\_\_\_\_

**NOTE:** *Payment will be made on the next regularly scheduled payroll cycle following receipt of this form.*

*\*Total stipend amount will be limited to \$750 per fiscal year for each speaker/employee.*

Stipend Approval Signature\*\*: \_\_\_\_\_ Date: \_\_\_\_\_

For Faculty:

Chair's or Program Director's Signature

For Chair/Program Director:

Dean's Signature

For Assistant/Associate Dean:

Dean's Signature

For Dean:

VP for Academic Affairs' Signature

For Staff Member:

Staff Member's Supervisor or Area VP Signature

*\*\*By signing above, I certify the described activities exceed the standard expectations of the employee's current position and all described activities have been completed.*

**Return completed form to DJ Mitchell, Chief Diversity, Equity and Inclusion Officer  
at [dmitchell2@bellarmine.edu](mailto:dmitchell2@bellarmine.edu)**