



SAINT LOUIS UNIVERSITY

1818 ADVANCED COLLEGE CREDIT
PROGRAM

<http://www.slu.edu/1818>

NEW 1818 HIGH SCHOOL COORDINATOR APPLICATION

Revised October 2017

Applicant Name:

First	Middle	Last
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Application Date:

Starting Academic Year:

WELCOME

Congratulations! You are taking your first step to becoming your high school's official 1818 Advanced College Credit High School Coordinator with Saint Louis University. Please fill out the following parts of the application in full:

1. Personal Information (page 2)
2. Biographical Information (page 3)
3. Intent to Participate (page 4)
4. Master Vendor Form (page 5-7)

**PLEASE EMAIL THIS DOCUMENT IN PDF FORMAT TO
[1818@SLU.EDU](mailto:1818@slu.edu) WHEN COMPLETE.**

PERSONAL INFORMATION

Full Legal Name:

Last	First	Middle Initial
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Current High School:

Date of Birth: ____ / ____ / ____

Social Security Number: ____ - ____ - ____

Personal Mailing Address:

Street Line 1

Street Line 2

City State Zip Code

School Email Address: _____ @ _____

School Phone Number: _____ - _____ - _____ ext. _____

Personal Email Address: _____ @ _____

Personal Phone Number: _____ - _____ - _____ ext. _____

BIOGRAPHICAL INFORMATION

Gender: Male Female Other

Citizenship: US Citizen If other, country of origin: _____

Marital Status: Single Married Life Partnered
 Divorced Widowed Other

Religious Preference: Baptist Christian Orthodox Episcopalian
 Jewish Lutheran Methodist Muslim
 Presbyterian Roman Catholic Protestant
 No preference Other: _____

Ethnicity: African American/Black Alaskan Native Asian
 Caucasian Hispanic Mexican American
 Native American Pacific Islander
 Other: _____

COORDINATOR MEMORANDUM OF PARTNERSHIP

As an active high school coordinator in the 1818 Advanced College Credit Program, I understand the requirements of active status, and agree to the following:

- **Involvement:** To ensure active participation the 1818 Program, 1818 High School Coordinators will: serve as the point of contact for the high school to the 1818 Program, oversee student enrollment and program compliance at the high school, coordinate student tuition scholarships, act as an in-person resource to advise students and parents about the program, manage the high school's course ledger and semester course listings, and attend the Annual Summer Symposium.
- **Academic Integrity:** To ensure 1818 college credit courses are comparable to their on-campus counterparts, 1818 High School Coordinators will: remind instructors to submit course syllabi in the appropriate [SLU Common 1818 Syllabus Template](#) annually, ensure grades are entered in a timely manner each semester, accommodate SLU Faculty Liaison and 1818 Program Office requests including site visits, advise students about college credit and participation in the 1818 Program, and uphold Saint Louis policies related to academic offerings.
- **Course Exclusivity:** To ensure the integrity and authenticity of Saint Louis University courses and to prevent confusion among dual credit students, 1818 Adjunct Instructors will: agree that Saint Louis University is the exclusive dual credit partner for the specific college courses they are approved to teach now and in the future through the program.

In agreement of these requirements, I am aware of my eligibility to the following benefits:

- Status as an 1818 High School Coordinator of Saint Louis University,
- Graduate tuition scholarships,
- Professional development and networking events,
- Direct access to designated SLU departments,
- Annual training stipend,
- Access to SLU recourses including library access, database access, SLU logo usage, SLU email account, Office 365, Google Apps, personal software discounts and downloads, and discounts at SLU's Campus Bookstore.

By signing the document, the individual agrees to uphold the various requirements of an active status throughout their tenure with Saint Louis University's 1818 Advanced College Credit Program.

Failure to uphold the Memorandum of Partnership risks putting the individual, dual credit offering, and/or partnership in a non-compliant status. A non-compliant status will result in discussion on the future partnership with the program, ability to continue to offer specific dual credit courses, provisional standards to be met to become active again, or the end of the dual credit partnership with Saint Louis University. Individuals and partner high schools will be notified privately by the Program Director for issues of non-compliance.

Name (printed)

Date

Signature (electronic acceptable)

Business and Finance Division

SAINT LOUIS UNIVERSITY

VENDOR MASTER FORM

eSeeDPV only

PLEASE TYPE OR PRINT FORM

SLU Contact: Saint Louis University - 1818 Program

Please note: This form is intended for individual working with the 1818 Program. You are only required to fill out the sections highlighted in yellow. All information provided should be your personal information.

Vendor Information Required for Payment

REMIT TO:

Vendor name _____
DBA _____
Street/PO Box _____
City, State, Zip _____
Contact Name _____
Telephone _____ - _____
Fax _____
Email Address _____ @ _____

Does this vendor accept American Express? [] Yes [x] No
Is this company listed as a Certified Minority Vendor? [] Yes [x] No

If Yes, please complete the attached Certification of Status Form

PAYMENTS TO NON-SLU PERSONS (place an X on the line to designate type)

- | | |
|--|--|
| <input type="checkbox"/> Attorney/Legal Fees | <input type="checkbox"/> Prize or Award |
| <input type="checkbox"/> Consulting/Other Services: _____ | <input type="checkbox"/> Professional Entertainment |
| <input type="checkbox"/> Dues/Subscriptions | <input type="checkbox"/> Refund |
| <input type="checkbox"/> Expense Reimbursement | <input type="checkbox"/> Rent |
| <input checked="" type="checkbox"/> Honorarium | <input type="checkbox"/> Services (type): _____ |
| <input type="checkbox"/> Licenses (Dr., Attorney, Car....) | <input type="checkbox"/> Speaker/Lecture Fee |
| <input type="checkbox"/> Local Seminar/Conference/Registration Fee | |
| <input type="checkbox"/> Medical/Healthcare Services | |
| <input type="checkbox"/> Patient Study | Non-Resident of US (Submit W8-BEN Form) |
| <input type="checkbox"/> Pre-Pay Travel | <input type="checkbox"/> Expense Reimbursement |
| <input type="checkbox"/> Pre-move | <input type="checkbox"/> Personal Services/Honoraria |

SLU DEPARTMENT INFORMATION

YOUR NAME: SLU 1818 Program PHONE: 314-977-1818 EMAIL: 1818@slu.edu

VENDOR BANNER ID NUMBER: _____

Complete form and return to eSeePay@list.slu.edu or fax 314-977-2298

Business and Finance Division

SAINT LOUIS UNIVERSITY

Please note:
SLU prefers direct deposit, but it is optional. If you wish to setup direct deposit please fill out this form, otherwise please disregard if you prefer a check.

Central Processing Center
3545 Lindell Blvd, 3rd Floor
St. Louis, MO 63103

YOUR SLU CONTACT: SLU 1818 Program

VENDOR DIRECT DEPOSIT AUTHORIZATION AGREEMENT

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Remittance Email: _____@_____

A BLANK, VOIDED CHECK MUST BE ATTACHED.

If this is not available, please provide a letter from/on your bank's letterhead stating the bank routing Number and account name and number to be used for Direct Deposits.

Cancellation of your direct deposit must be made in writing. If any of your bank account numbers or Transit numbers change, it will be necessary to complete a new Direct Deposit Authorization Agreement.

ACCOUNT FOR DEPOSIT (US BANKS ONLY)

Routing Number: _____ Account Number: _____

Type of Account: Checking; Savings; Money Market; Other: _____

Bank Name: _____ Branch Location: _____

Address: _____

City: _____ State: _____ Zip: _____

We hereby authorize Saint Louis University to initiate credit entries to the account indicated above.

Signed by: _____ Date: _____

Title: _____

Saint Louis University Use Only:

Vendor #: _____

**Request for Taxpayer
 Identification Number and Certification**

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	1	Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2	Business name/disregarded entity name, if different from above	
	3	Check appropriate box for federal tax classification; check only one of the following seven boxes: <input checked="" type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6	City, state, and ZIP code	
	7	List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									
or									
Employer identification number									

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.