

### http://www.csuci.edu/ira/index.htm

#### **Application**

### **Instructionally Related Activities Funds Request** 2008-2009 Academic Year

**DEADLINE: Fall and Academic Year 3/14/08** Spring 10/15/08

Applications must first be sent to the appropriate program chair. Chairs will the recommend and route them to the Dean's Office for review and authorization. The Dean's Office will then forward them to the IRA Committee for consideration.

Activity Title: The Globally Competent Graduate: Symposium and Classroom Discussions

Project Sponsor/Staff (Name/Phone): Terry Ballman, Chair of Spanish and Languages and Coordinator of the Global Studies Minor / 437-8996; Mary Devins, Support Coordinator/437-3253

Activity/Event Date(s): November 19, 2008 Date Funding Needed By: October 1, 2008

\*\*Please Note that for Fall Requests the earliest that you will be notified of funding availability will be early June 2008 and for Spring Requests early January 2009.

#### Please check if any of the following apply to your IRA:

□ Equipment Purchase  X Event □ IT Requirements □ International Travel □ Space/OPC Requirements □ Risk N □ Infrastructure/Remodel □ Other	<ul> <li>Field Trip</li> <li>Participant data collection for public dissemination, i.e. interviews/surveys that result is a journal/poster session/newsletter</li> <li>Management Consultation</li> <li>Late Submission (Passed Deadlines: Fall 3/14 Spring 10/15)</li> </ul>				
Previously Funded: □YES <b>X</b> NO	Yes, Request #				
Does your proposal require IRB (Institu	utional Review Board) approval: ¤Yes <b>X</b> No				
Assessment submitted for previously F	Funded Activity: □YES <b>X</b> NO				
Academic Program or Center Name Center for International Affairs Global Studies Minor	and Budget Code:				
Date of Submission: March 14, 2008					

Amount Requested: \$7,400

(Should match item 2. E. on page 4)

Estimated Number of Students Participating: 200-300

#### **Conditions and Considerations**

**Equipment Purchase**-If requesting large equipment, Project Sponsor must show proof of correspondence with OPC Administration. In addition, all other purchases must follow Procurement Guidelines

**Events**-Attach copy of Events and Facilities Use Request Form (Public Folders-Events & Facilities folder) Consider time frame for set-up and take down.

Participant Data Collection for Public Dissemination-If Project Sponsor proposes to conduct research with human participants then it may be subject to IRB (Institutional Review Board for the Protection of Human Subjects) review. It is the Project Sponsor's responsibility to inquire with the IRB <u>prior</u> to IRA application submission to determine if the project is exempt from IRB review so that funding is not delayed. Please indicate on the cover page if your project is exempt from IRB review.

**Field Trip**-If approved, Identified Risks of Participation and Release Agreement must be submitted for each student to the Program Office (Public Folders-HR Forms).

IT Requirements-Requires proof of correspondence and approval from IT Administration

**International Travel**-Requires International Travel application be submitted to Center for International Affairs.

**Risk Management Consultation**-Requires proof of correspondence with Risk Management.

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Late Submission (Deadlines: Fall 3/14, Spring 10/15)-Requires explanation for emergency funding.

**Fiscal Management:** Project Sponsor's program will be responsible for all costs incurred over and above what is funded through the IRA award and will be responsible for seeing that any revenue that is intended to offset the amount of the IRA award is transferred accordingly.

#### Requirements and Signatures

Please provide the following in your application:

1. **Brief Activity Description.** Describe the activity and its relationship to the educational objectives of the students' program or major.

One of the pillars of the CSUCI Mission is to graduate students with international perspectives. International Education Week, November 17-21, 2008, is a time for universities across the U.S. to celebrate and promote programs and events that deal with global issues, awareness and preparedness.

Globalization impacts our daily lives, from the food we buy, to the cars we drive, to the movies we watch, to the values we hold. Further, at the national and state levels, the consequences of globalization affect public policy decisions on economic, social and environmental issues. Today's CSUCI graduate will need to succeed in a knowledge-driven world challenged by these forces of globalization.

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- a. an author on the significance of the global economy (e.g, Georgetown University economics professor Pietra Rivoli, author of *The Travels of a T-Shirt in the Global Economy* [2006]);
- b. a government official, preferably a representative from the Mexican consulate
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Each speaker would be asked to address the following issues, among others:

a) How does the global economy affect their organization?

- b) What does it mean to be a globally competent graduate?; and
- c) Why is global competence critical for success in today's workplace?

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- •BUS/BIOL 331 Biotechnology in the 21st Century
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- COMM 321 Cultural Conversations
- •MGT 310 Management of International Business
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- •BIOL 333 Emerging Public Health Issues
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Questionnaires will be distributed in the classes visited by the speakers to assess the benefits and impacts of each class visit on students.

**4. Activity Budget.** Please enclose a complete detailed budget of the entire Activity **bold** specific items of requested IRA funding.

Please see attachment.

**5. Sources of Activity Support.** Please list the other sources of funding, and additional support for the activity.

N/A

7. **Acknowledgment.** Project Sponsor and Program Chair acknowledge that they have reviewed and accepted the Conditions and Considerations detailed on page 2.

Signatures and Dates

Juny Pallman

Project Spansor

Date

Program Chair/Director

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Dean

RECEIVED

MAR 14 2008

Dean's Office

### ACTIVITY BUDGET FOR 2008-2009

1. Operating Expense Budget	
A. Supplies	\$600 Packet of reading materials will be
	made available for distribution
B. Vendor Printing	\$200 Professional printing of flyers and
	posters for the symposium
C. In-State Travel	
D. Out-of-State Travel	
E. Equipment Rental	
F. Equipment Purchase	
G. Contracts/Independent Contro	actors
H. Honorarium	\$3500 1 speaker (e.g., the author) who will
	need to travel from out-of-state
	<b>\$3000</b> 3 speakers from in-state @ \$1000 each
Total for speakers:	\$6,500
I. OPC Chargeback	\$100
J. Copier Chargeback	
K. Other (Please Specify)	···
TOTAL Expenses	\$7400
2. Revenue	
A. Course Fees	
B. Ticket Sales C. Out of Pocket Student Fees	
(exclusive of course fees)	•
<ul><li>D. Additional Sources of funding</li></ul>	
(Please specify	
And indicate source)  E. Requested Allocation	
from IRA	
Total Revenue	

CSUCI

PAGE 02

State of California—Department of Health Services

#### PAYEE DATA RECORD

(Required in Ileu of IRS W-9 when doing business with the State of California)

STD 204 (Rev 2-2000)

Note: Gover	nmental Entitles, federal, state, and local (including ache	ool districts) are not required to	submit this form.			
SECTION 1 m	ust be completed by the requesting state agency before form	varding to the payee				
	PARTMENT/OFFICE					
	SU Channel Islands	PURPOSE: Information contained in this form will be used by state agencies to prepare information Returns (Form 1099) and for withholding on payments to nonresident vendors. Prompt return of				
	REET ADDRESS					
TO:	One University Drive					
	TY, STATE, ZIP CODE Camarillo, CA 93012	this fully completed form will prevent delays when				
	LEPHONE NUMBER	processing payments.				
	805) 437-8400	(See Privacy Staten	ient on Page 2)			
<u> </u>	BUSINESS NAME BAGIEN					
_7	1 Golden GLEN DRIVE					
MAILING	ADDRESS (Number and Street or P.O. Box Number) Mi Valley, CA 9306		64.71), 441			
(CITY, S'	ATE, and ZIP CODE)	<u> </u>				
3	CHECK ONE BOX ONLY	A Administration of the Control of t				
PAYEE ENTITY	LEGAL CORPORATION	PARTNERSHIP	NOTE: State and			
INFORMATION	MEDICAL CORPORATION	ESTATE OR TRUST	entities, including			
	EXEMPT CORPORATION (Non-profit)		school districts are not required to			
	ALL OTHER CORPORATIONS		submit this form.			
	FEDERAL EMPLOYER'S IDENTIFICATION NUMBER (FEIN)					
			NOTE: Daniel III			
	INDIVIDUAL SOLE PROPRIETOR		NOTE: Payment will			
	INDIVIDUAL SOLE PROPRIETOR SOCIAL SECURITY NUMBER OWNER'S FU	ILL NAME	processed without			
	1412131-1461-17686		an accompanying taxpayer i D.			
			number.			
4	CHECK APPROPRIATE BOX(ES)		NOTE:			
PAYEE RESIDENCY	California Resident - Qualified to do business in CA business in CA.	or a permanent place of	a. An estate is a resident if			
STATUS	Nonresident (See Page 2). Payments for services by to state withholding.	y nonresidents may be subject	decedent was a California resident at time of death.			
	WAIVER OF STATE WITHHOLDING FROM FRANCH	HISE TAY BOARD ATTACHED	b. A trust is a			
	SERVICES PERFORMED OUTSIDE OF CALIFORNI		resident if at least one trustee is a California resident.			
5	I hereby certify under penalty of perjury that the	information provided on this do	(See Page 2)			
CERTIFYING	is true and correct. If my residency status shou	ild change, I will promptly inform	уои.			
SIGNATURE	AUTHORIZED PAYRE REPRESENTATIVE'S NAME (Type of Print) Theodore Dagled	Vice President	HUMAN RESOURCE			
	Theodere Bagles		EPHONE NUMBER			
	11					

240

### **INVOICE**

Due to: George Ritzer

Fee: \$2500.00

For: Speech entitled "Globalization: Its Impact on You" presented CSUCI on

November 19, 2008

Purchase Order Number: 0000007069

APPROVED FOR PAYMENT

DATE 1-8'ACCT 613802

CONTRACT/PO\_\_\_

90212

PAYMENT IN FULL

# SH

### California State University Channel Islands Check Request Form

To be used for transactions other than employee travel or those requiring a purchase order or service agreement.

							\ i	
MAK	CHECK PAY	ABLE TO:				1	40	
	Name: De	esignworks/USA, I	nc	,	PeopleSoft Vendor ID:			
	Address 1:	2201 Corporate (	Center Drive		Note: New ye	endors must comple	te a Form 204	
	Address 2:				Check will I	<b>be:</b> o the address at lef	<del>)</del>	
	City, State Zip: Newbury park, CA 91320					p from Cashier - E		
	- 1.55, ~ 1.00 C	Exp. 110Wouly pa	IR, CA 91320		Description as it should appear on reports (30 characters)			
	Amount \$	1000.00	ANT THE RESIDENCE OF THE PARTY		Designwork	s/Robin Honorar	ium	
TYP	E OF PAYM	ENT (Attach original	receipts and invoice, if	applicable)			7777	
	Accredi Advertis Freight/ Honorar Interpret PO Clos CSU Ov Lodging * To be used t **Please attac ***To be used Descriptio Honorariu	tation Fee sing Shipping ium/Speaker Fee(un ting/Notetaking Svc	Memb   Non-F   Parkin   Parkin   Payrol   Permin   Tax Re   Art M   Marriott (Camarillo only.	pership/Dues Employee Reimb* ng/Bank Fee Il Advance* t/License Fee emittance odels o only)  form to this check re been closed and price ker series. See a	equest.		dical Approval Frm) n-General Fund)	
CHAI								
	Account 613802	Fund TK910	Dept ID	Program	Class	Project/Grant	Amount	
	013602	11310	827	90212			\$1,000.00	
Reque	***************************************	ry Devins x3253		NOW Signature	Deci	Total	\$1,000.00	
Appro	ved by: <u>Dan</u>	Wakelee Printed Name		Can Signature	lı_	12/71/08 Date	d-transportant-and-and-and-and-and-and-and-and-and-and	

246

proper used for transactions office mail employee traver or those requiring a purchase order of service agreement,

	ngen Pharmaceuti	cals		PeopleSoft	Vendor ID:	er.			
Address 1	Address 1: 1 Amgen Center Drive				Note: New vendors must complete a Form 204				
Address 2					o the address at left				
City, State	Zip: Thousand C	Oaks, CA 91320			p from Cashier - E				
Amount S	5 1000.00	-		Bagley Hon	-	is (50 characters)			
YPE OF PAYM	ENT (Attach origina	receipts and invoice, if a	applicable)						
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Account	Fund	Dept ID	Program	Class	Project/Grant	Amount			
	Fund TK910	Dept ID	Program 90212	Class	Project/Grant	Amount \$1,000.00			
Account				Class		\$1,000.00			
Account 613802				Class	Project/Grant  Total  10/28/08				



### California State University Channel Islands Check Request Form



To be used for transactions other than employee travel or those requiring a purchase order or service agreement.

MAK	E CHECK PAY	ABLE TO:					-	
	Name: Th	eodore Bagley				Vendor ID:		
	Address 1: 71 Golden Glen Drive				Note: New v	endors must complet	e a Form 204	
	Address 2:				Check will be:  ☐ Mailed to the address at left ☐ Picked up from Cashier - Ext 3253			
	City, State Zip: Simi Valley, CA 93065					t should appear on report		
	Amount \$	1000.00			Bagley Hor		is (30 characters)	
TYP	E OF PAYM	ENT (Attach original i	receipts and invoice, if	applicable)				
	Advertis Freight/ Honorar Interpret PO Clos CSU Ov Lodging * To be used t **Please attac ***To be used  This is a re of the paye the check t voided req	Shipping ium/Speaker Fee(un ting/Notetaking Svc	Non-E Parkir Payrol Permir Tax Re Art M Marriott (Camarill only. yee reimbursement a PO on invoice has on of payment.  Lis check request the individual whis company. 20	form to this check red been closed and prio that has now bee o came to campu 04 was previously	quest. r year funds have	are changing the	Approval Frm) n-General Fund) name	
CHAI								
	Account 613802	Fund TK910	Dept ID 827	Program 90212	Class	Project/Grant	Amount \$1,000.00	
D 0	otod 3.6		(	Mo. W	)	Total	\$1,000.00	
Reque		ry Devins x3253 rinted Name & Extension		Signature		12/9/08 Date		
Appro	ved by: <u>Dan</u>	Wakelee Printed Name		Signature	alee	~ 12/9/06/ Date	)	

Check Date: Nov 25, 2008 CSU CHANNEL ISLANDS CICMP Check No. 119608 Invoice Number Invoice Date Voucher ID Gross Amount Discount Available Paid Amount HON-Bagley-11/08 10/28/2008 00046603 1,000.00 0.00 1,000.00 HON-Bagley-11/08

VOID/NO Re13522

## File Copy

Vndr Num 0000005307 Amgen Pharmaceuticals

PAY TO THE

ORDER OF

AMGEN PHARMACEUTICALS

Thousand Oaks, CA 91320-1799

1 Amgen Center Dr.

Total

\$1,000.00 Disc Taken

\$1,000.00

#### **CSU CHANNEL ISLANDS**

119608

56-382/412 9600085345

**CHECK DATE** 

**PAY AMOUNT** 

Nov 25, 2008

\*\*\$1,000.00\*\*

\*\*ONE THOUSAND AND XX / 100 DOLLAR\*\*

Wells Fargo Bank, N.A 115 Hospital Drive Van Wert, OH 45891

\*NON-NEGOTIABLE\*

AMOUNTS GREATER THAN \$15,000 REQUIRE TWO SIGNATURES
VOID AFTER SIX MONTHS





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To be used for transactions other than employee travel or those requiring a purchase order or service agreement.

MAKE CHECK PAY	able <b>†@</b> # 001 30	) P 12: 14			10.00	<del>/</del>		
	gen Pharmaceutica			PeopleSoft V	endor ID:			
Address 1:	Address 1: 1 Amgen Center Drive				ndors must comple	te a Form 204		
Address 2:	Address 2:  City, State Zip: Thousand Oaks, CA 91320  Amount \$ 1000.00				Check will be:  Mailed to the address at left  Rickedup from Cashier - Ext 3253  Description as it should appear on reports (30 characters)			
City, State								
Amount \$					orarium			
TYPE OF PAYMI	ENT (Attach original r	eceipts and invoice, if	applicable)		. <del> </del>	**************************************		
Advertis Freight/S Honorar Interpret PO Close CSU Ove	Shipping ium/Speaker Fee(und ing/Notetaking Svc	☐ Non-E ☐ Parkir der IK)☐ Payrol ☐ Permi ☐ Tax Re ☐ Art M Marriott (Camarill only.	o only)	F   F   S   U   S   P   M	Postage Refund Registration Fee (v Subscription/Perio Itilities Sodexho (w/ Meal Prizes/Awards (No RA Activity	Approval Frm)		
***To be used	n and/or explanation	PO on invoice has	been closed and prio	r year funds have l	been reverted.			
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	TP 81.	<u>,                                    </u>						
CHARGE		: <del>:</del>				<u> </u>		
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*	ry Devins x3253		Marx	<u>k</u>	10/28/08			
Р	rinted Name & Extension		Signatur	$\gamma$	Date (2) 28/3	1 A2		
Approved by: Dan	Wakelee Printed Name	— \ <del>[</del>	Signature	Jale	Date	<del></del>		



October 15, 2008

Mr. Theodore Bagley 71 Golden Glen Drive Simi Valley, CA 93065 mores

Dear Mr. Bagley:

Please know how pleased we are here at CSUCI that you have agreed to be one of the three speakers on the panel "Globalization: Its Impact on You," to be held on November 19, 2008 from 4:00—5:30 p.m. This a major event during International Education Week, Nov. 17--21 when CSUCI joins universities across the U.S. to celebrate and promote programs and events dealing with global issues, awareness and preparedness.

The purpose of this letter is to formalize the invitation and give you more information about the event. Each of the speakers is asked to speak for 15-20 minutes. We are in the process of setting up a conference call so that the three of you can agree on major talking points. The proposed schedule is as follows:

Nov. 19, 4:00—5:30 p.m.

- •Opening remarks by Ashish Vaidya, Dean of the Faculty
- •Introduction of the speakers by Terry Ballman
- •Dr. George Ritzer, University of Maryland sociology professor and author of *The McDonaldization of Society*
- •Mr. Ted Bagley, Vice President Human Resources—World Wide Manufacturing for Amgen, Inc.
- •Ms. Laura Robin, BMW Group DesignworksUSA Director of Design Research
- Question and Answer session

We are pleased to offer you an honorarium of \$1,000 in gratitude for your participation. Enclosed is a form with sending instructions that needs to be completed.

The panel will take place on the CSUCI campus, in the Petite Salon. We will be sending you a parking pass close to the day of the event. We look forward to meeting you.

Sincerely,

Juy L. Ballman Terry L. Ballman

Professor of Spanish and Chair of Spanish/Languages terry.ballman@csuci.edu (805) 437-8996

Encl: Payee Data Record 204 Form

Cc. Ashist Vaidya, Den 7 He Faculty One University Drive, Camarillo, California 93012-8599 • Tel: (805) 437-8967 • Fax: (805) 437-8864 • www.csuci.edu



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Coordinator of the Global Studies Minor / 437-8996; Mary Devins, Support

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Date Funding Needed By:

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Does your proposal require IRB (Instit	utional Review Board) approval: aYes XNo
Assessment submitted for previously	Funded Activity: aYES XNO
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- b. a government official, preferably a representative from the Mexican consulate
- c. a specialist in global marketing (e.g., a representative from J.D. Power and Associates, the global marketing information services firm)
- d. a scientist working in a multinational firm (e.g., a representative from Amgen or Teledyne)

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<u>Signatures and Dates</u>

Juny Ballman

3/13/08

Date

Program Chair/Director

Date ,

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3/17/108

Dean

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Dean's Office

### **ACTIVITY BUDGET FOR 2008-2009**

1. Op∈	erating Expense Budget	
-	A. Supplies	\$600 Packet of reading materials will be
		made available for distribution
	B. Vendor Printing	\$200 Professional printing of flyers and
		posters for the symposium
	C. In-State Travel	
	D. Out-of-State Travel	
	E. Equipment Rental	
	F. Equipment Purchase	
	G. Contracts/Independent Contrac	otors
	H. Honorarium	\$3500 1 speaker (e.g., the author) who will
	·	need to travel from out-of-state
		\$3000 3 speakers from in-state @ \$1000 each
	Total for speakers:	\$6,500
	I. OPC Chargeback	\$100
	J. Copier Chargeback	
	K. Other (Please Specify)	
	TOTAL Expenses	\$7400
2. Rev	enue	
	A. Course Fees	
	B. Ticket Sales C. Out of Pocket Student Fees	
	(exclusive of course fees)	
	D. Additional Sources of funding	
	(Please specify	
	And indicate source)  E. Requested Allocation	
	from IRA	
	Total Revenue	

#### REQUEST FOR GOODS & SERVICES (RGS) PO #: Procurement use only CALIFORNIA STATE UNIVERSITY CHANNEL ISLANDS Date: 10/29/2008 Requestor Name: Mary Devins New Vendor: ✓ Yes x3253 Vendor Name: George Ritzer Phone: AA for 827 Address: 1801 Gamewell Road Dept #/Name: \* Delivery Date: 11/19/2008 City/State/Zip: Silver Spring, MD 20905 301-421-9014 Phone: Quote #: (Please attach all quotes) Fax: 3-way E-mail: Matching rules: mary.devins@csuci.edu \* E-mail copies to: Sales Rep: receiving@csuci.edu Receiving instructions: Bldg: Rm #: Catalog/Part # UOM QTY Unit Price Ext. Price Account # Fund Dept # Program Class Description Project \$0.00 **Taxed Subtotal** \$0.00 NON-TAXABLE ITEMS \$0.00 Dr. George Ritzer \$0.00 Globalization: Its Impact on You DLR \$2,500.00 \$2,500.00 613802 TK910 827 90212 Guest Speaker Honorarium \$0.00 \$0.00 \$0.00 \$2,500,00 Comments: Form 204 and offer letter and **Contract Services:** Subtotal ☐ CMAS \$0.00 IRA Proposal Attached. Check one: MEA Tax Contract proposal attached Shipping \$2,500.00 State Contract #: Total Print name/Signature Signatures/Approvals Contract Administrator: IT/OPC Mgr (if requirec\_ Phone: If order is AT related. An approval signature must be obtained. E-mail: Chair/Dept. Budget: Dean/Director: Division VP/Designee: President (if required):

<sup>\*</sup> required

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State of California-Dopertment of Health Services

#### PAYEE DATA RECORD

(Required in lieu of IRS W-9 when doing business with the State of California)

STD 204 (Rev. 2-2000)

Note: Governmental Entities, federal, state, and local (including school districts) are not required to submit this form. SECTION 1 must be completed by the requesting state agency before forwarding to the payee DEPARTMENT/OFFICE PURPOSE: CSU Channel Islands Information contained in this form will be used by state agencies to prepare Information PLEASE STREET ADDRESS Returns (Form 1099) and for withholding on RETURN One University Drive TQ: payments to nonresident vendors. Prompt return of CITY, STATE, ZIP CODE this fully completed form will prevent delays when Camarillo, CA 93012 processing payments. TELEPHONE NUMBER (See Privacy Statement on Page 2) (805) 437-8400 PAYEE'S BUSINESS NAME RUAD AMENELL MAILING ADDRESS (Number and Street or P.O. Box Number) 20505 (CITY, STATE, and ZIP CODE, CHECK ONE BOX ONLY PAYEE П LEGAL CORPORATION NOTE: State and **PARTNERSHIP** ENTITY local governmental INFORMATION  $\Box$ MEDICAL CORPORATION entities, including **ESTATE OR TRUST** school districts are П EXEMPT CORPORATION (Non-profit) not required to submit this form. ALL OTHER CORPORATIONS FEDERAL EMPLOYER'S IDENTIFICATION NUMBER (FEIN) NOTE: Payment will not be INDIVIDUAL SOLE PROPRIETOR processed without SOCIAL SECURITY NUMBER OWNER'S FULL NAME an accompanying 092 - 32 - 71114 taxpayer I.D. number. CHECK APPROPRIATE BOX(ES) NOTE: California Resident - Qualified to do business in CA or a permanent place of a. An estate is a PAYEE business in CA. resident if RESIDENCY decedent was a Nonresident (See Page 2). Payments for services by nonresidents may be subject **STATUS** California resident to state withholding. at time of death. ☐ WAIVER OF STATE WITHHOLDING FROM FRANCHISE TAX BOARD ATTACHED b. A trust is a resident if at least ☐ SERVICES PERFORMED OUTSIDE OF CALIFORNIA one trustee is a California resident. (See Page 2) I hereby certify under penalty of perjury that the information provided on this document is true and correct. If my residency status should change, I will promptly inform you, CERTIFYING AUTHORIZED PAYEE REPRESENTATIVE'S NAME (Type or Print) TITLE SIGNATURE SIGNATURE DATE TELEPHONE NUMBER 10-24-08



October 15, 2008

Dr. George Ritzer
Distinguished University Professor
University of Maryland—College Park

240

Dear Dr. Ritzer:

Please know how pleased we are here at CSUCI that you have agreed to be the lead speaker on the panel "Globalization: Its Impact on You," to be held on November 19, 2008 from 4:00—5:30 p.m. in the Petite Salon. This a major event during International Education Week, Nov. 17—21, when CSUCI joins universities across the U.S. to celebrate and promote programs and events dealing with global issues, awareness and preparedness.

The purpose of this letter is to formalize the invitation and give you more information about the event. Each of the three speakers is asked to speak for 15-20 minutes. We are in the process of setting up a conference call so that the three of you can agree on major talking points. The proposed schedule is as follows:

Nov. 19, 4:00—5:30 p.m.

- •Opening remarks by Ashish Vaidya, Dean of the Faculty
- •Introduction of the speakers by Terry Ballman
- •Dr. George Ritzer, University of Maryland sociology professor and author of *The McDonaldization of Society*
- •Mr. Ted Bagley, Vice President Human Resources—World Wide Manufacturing for Amgen, Inc.
- •Ms. Laura Robin, BMW Group DesignworksUSA Director of Design Research
- •Question and Answer session

We are pleased to offer you an honorarium of \$2,500 in gratitude for your participation. We are also pleased that you have agreed to meet with sociology students prior to the event. Attached is a form that needs to be returned via fax to Mary Devins, (805) 437-8864.

We look forward to meeting you.

Sincerely,

Terry L. Ballman
Professor of Spanish and Chair of Spanish/Languages
terry.ballman@csuci.edu (805) 437-8996

cc: Ashish Vaidya, CSUCI Dean of the Faculty
Alison Mudditt, Exec. VP, Higher Educ. Group—SAGE Publications, Inc.