

Stipend Request Form

The purpose of this stipend form is to compensate the employee for services performed in addition to his/her regular responsibilities. This form must be sent to the area Vice President for approval then forwarded to the Payroll Office. Payroll will then submit the request to the University Budget Director for approval.

New recipients should contact the Payroll Office to complete a W-4 for tax information.

Check one: Faculty Staff Student

Name of person to be paid*: _____ Social Security #: _____

Amount: \$ _____ Date to be Paid: _____

Purpose of Stipend: _____

Signature: _____
[Requestor] [Date]

Signature: _____
[Vice President/Dean Approval] [Date]

SOURCE OF FUNDING:

Unit or Organization Name [e.g., "Chemistry Department" or "XYZ Grant"]

Name

Accounting Information [**must provide AIMS and Banner accounting information**]:

AIMS Accounting Information			Banner Accounting Information		
AIMS Fund	AIMS Unit	AIMS Object Code	Banner Fund	Banner Org	Banner Account

For Budget/Payroll Use:

Budget Approval: _____
[Signature] [Date]

Processed: _____
[Signature] [Date]

*If more than one individual for this program/event, please attach list.

Send one copy to Payroll and retain one copy in department.