

**Departmental Student Award System  
(DSAS) Stipend Payment Form**

Research Unit: \_\_\_\_\_

**Section 1: Student Information**

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

SID: \_\_\_\_\_

Email: \_\_\_\_\_

Student Status:  Graduate  Undergraduate

Graduation Mo/Yr: \_\_\_\_\_

International Student

GLACIER Initiated (Internat'l Students Only)\*

\*GLACIER is an Online Non-Resident Alien Tax Compliance System and is necessary for international students for payments to be released.

**Section 2: Stipend Information**

Stipend Amount: \_\_\_\_\_

Term/Year: Select Term

Multi-Year Fellowship

Check here if stipend is an NSF Participant Support Payment (not processed through DSAS)

**Payment Schedule**

Pay entire amount on this date: \_\_\_\_\_

Monthly Payments: Start Date - Mo/Yr: \_\_\_\_\_ \* No of months: \_\_\_\_\_

\*Monthly payments between the 1<sup>st</sup> and 3<sup>rd</sup> of the month

Custom Payments:

Start Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_

Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_ Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_

Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_ Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_

Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_ Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_

Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_ Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_

Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_ Mo/Yr: \_\_\_\_\_ Amount: \_\_\_\_\_

Check here if award pays outstanding CARS bills first

Check here if student does NOT need to be registered

Check here if award needs to be paid at the end of the month: (E.G. Training Grants)

Check here if award is intended for Travel or Research\*

\*If checked a Travel/Research budget will be required before payment can be released

**Fund: \_\_\_\_\_ Org Cd: \_\_\_\_\_ Project Cd/Chartfield 1: \_\_\_\_\_ Flexfield/Chartfield 2: \_\_\_\_\_\***

\*Account and Program Codes are determined by DSAS

COMMENTS:

**Section 3: Approvals**

**Preparer Name:** \_\_\_\_\_

**Principal Investigator (PI)/Dept. Head Name:** \_\_\_\_\_

**PI/Dept Head Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CSS Funding Approver Name:** \_\_\_\_\_

**Funding Approver Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

HR Signature: \_\_\_\_\_ DSAS Entry Date: \_\_\_\_\_

Transaction Number: \_\_\_\_\_