



GRADUATE STUDENT RESEARCH SCHOLARSHIP(S) PAYMENT FORM (PAID AS A LUMP SUM PER TERM)

PLEASE USE A DIFFERENT SECTION FOR EACH TERM

A	STUDENT INFORMATION		
Person ID	First Name	Surname	

B	PAYMENT REQUEST						
Description (attach supporting document)							
Fall Term (September – December) <input type="checkbox"/>		Winter Term (January – April) <input type="checkbox"/>		Spring/Summer Term (May – August) <input type="checkbox"/>		Total Amount Per Term (\$)	
Chartfield String	Fund	Account	Department	Program Code	PC Business Unit	Project	
Chartfield String #1							
Chartfield String #2							

Description (attach supporting document)							
Fall Term (September – December) <input type="checkbox"/>		Winter Term (January – April) <input type="checkbox"/>		Spring/Summer Term (May – August) <input type="checkbox"/>		Total Amount Per Term (\$)	
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Chartfield String	Fund	Account	Department	Program Code	PC Business Unit	Project	
Chartfield String #1							
Chartfield String #2							

C	AUTHORIZATION				
Academic Plan(Program)	Ext.	Name	Signature	Date (yyyy/mm/dd)	
Research Office (University / FHS)	Ext.	Name	Signature	Date (yyyy/mm/dd)	
Finance Office (University / FHS)	Ext.	Name	Signature	Date (yyyy/mm/dd)	

Obtain required Signatures and forward to: School of Graduate Studies – GH - 212