**Stipend Payroll Request Form**

Use this form to compensate an employee for services performed in addition to his/her regular responsibilities. This form can also be used to pay student stipends for work performed relating to grant funds. The form must be completed and sent to the appropriate Cabinet member for signature and budget approval. The signed form is then forwarded to the Payroll Office for processing.

**New Employees should contact the Payroll Office to complete all necessary new hire paperwork.**

Check One:  _____ Faculty  _____ Staff  _____ Student  _____ Part Time/Adjunct

Name of person to be paid*: ______________________________________________________

Amount:  $_______________  Date to be Paid: __________________________________

Purpose of Stipend (please attach supporting payment documents): ______________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Source of funding (budget line):  
______________________________________________________________________________

______________________________________________________________________________

Print Name & Signature of Authorized Requestor    Date
______________________________________________________________________________

Cabinet Officer         Date
______________________________________________________________________________

Date Received in Payroll Office ________________________________

Date to be paid through Payroll __________________________________

*Please complete a separate Stipend Request Form for each individual.