

# Service-Free Stipend Request Form

*for Graduate/ Professional Students and Fellows only*

Is the payee either a US Citizen or Permanent Resident? <i>If No, route the completed form to the International Tax Office for processing.</i>	YES	
	NO	

Is this payment service-free? <i>If service is required, use a PAF to process the request.</i>	YES	
	NO	

Supervisory Organization \_\_\_\_\_

Position Number: \_\_\_\_\_

### Payee Information

### Requestor Information

*Questions will be referred to the person(s) listed below.*

Payee Name \_\_\_\_\_  
 Social Security # \_\_\_\_\_  
 or Employee ID \_\_\_\_\_  
 Address Line 1 \_\_\_\_\_  
 Address Line 2 \_\_\_\_\_  
 City \_\_\_\_\_  
 State \_\_\_\_\_  
 Zip \_\_\_\_\_  
 Date of Birth \_\_\_\_\_  
 (mm/dd/yyyy)

Supervisory Org \_\_\_\_\_  
 Department Name \_\_\_\_\_  
 Mail Drop \_\_\_\_\_  
 Requestor Name \_\_\_\_\_  
 Requestor Phone \_\_\_\_\_

Comments: \_\_\_\_\_

### Payment Information

Type of Request <i>(mark one box only)</i>	New	
	Change	
	Discontinue	

Payment Start Date \_\_\_\_\_  
 Payment End Date \_\_\_\_\_  
 Amount of Monthly Payment \_\_\_\_\_  
 Number of Payments \_\_\_\_\_  
 Total Payout Amount \_\_\_\_\_

Service Start Date \_\_\_\_\_  
 Service End Date \_\_\_\_\_

Payment Detail				For HR Use Only	
SC/Account	Worktags (GF/GR/PJ/PG/CC)	Monthly Amount	Approved By and Date <i>Additional Pay Form Authorized Signature for Center Number</i>	Job Code	Earnings Code
SC135/6310		\$			
			<i>Print name of approver</i>		
SC135/6310		\$			
			<i>Print name of approver</i>		
SC135/6310					
			<i>Print name of approver</i>		
SC135/6310					
			<i>Print name of approver</i>		

**Total Monthly Payment**

Supporting documentation must be maintained in the originating department; please do not submit for processing.  
 If additional explanation is required, please attach separate sheet.

Additional Approvals <i>(if needed for Colleges, Schools, or Programs)</i>		
Print Name	Signature	Date

**This area only for use by HR Processing**

HR Routing Information DE Entry: \_\_\_\_\_ DE Audit: \_\_\_\_\_ PR Entry: \_\_\_\_\_ PR Audit: \_\_\_\_\_