CAL STATE LA UAS
AUXILIARY SERVICES INC.

STIPEND REQUEST

First time payees need to fill out the Payee Data Record Form. Click Here for Payee Data Record Form

Stipend Recipient Information:						Requested By:	
NAME						Name:	
STREET						Dept./Room No:	
CITY		STATE		ZIP		Phone/ Ext.:	
Campus Wide ID (XXX-XX-XXXX)						Date:	

IS THE PAYEE A CSULA EMPLOYEE?	Yes ☐ No ☐	IS THE PAYEE AN UAS EMPLOYEE?	Yes ☐ No ☐
IS THE RECIPIENT A CSULA STUDENT?	Yes ☐ No ☐	IS THE PAYEE A US CITIZEN?*	Yes ☐ No ☐

***NOTE:** Federal funds may not be used to support individuals who lack legal immigration status.

DID THE RECIPIENT PERFORM ANY SERVICE OR WORK TO RECEIVE THIS PAYMENT? Yes ☐ No ☐

Stipends are payments to individuals as a scholarship, fellowship, financial assistance grant, training grant, or other contribution to support educational or training expenses. This support can include tuition, living costs, and other incidental expenses which will enhance the individual's level of competence in a particular area, and which may or may not be accompanied or supplemented by a full or partial tuition waiver.

Reason for Stipend:				Project	Account	Fund	Department	Amount	1099
Stipend Start Date:		End Date:							

Describe the training received by the recipient or the activity in which the recipient participated:

Stipend Recipient Signature Acknowledgment **Date**

I am a participant of the program making this payment and did not perform any type of service. I understand also that a student receiving stipend payments who also receives other financial aid should contact the Office of Financial Aid to discuss how this payment could affect other aid.

UAS Accounting Services Use

Allowability by:	SUPID:		W9 on File?	Yes ☐ No ☐
	Remarks:			

Sample authorized signatures must be on file at UAS corporate office and agree with the signatures on the request.

Principal Investigator or Project Director Certification:

I certify that the expenses incurred are for bona fide business purposes, and the information provided is true and accurate. I certify that the expenditures benefit the educational mission of the CSU as defined by the respective statutes, Board of Trustees policies, campus policy, and UAS policy, and that all items are for official business and include no personal expense. **I certify that the above payments, if made to a student, are NOT contingent upon teaching, research, or any other service performed by the student.**

Signature of Principal Investigator/Project Director **Date**

Name of PI/PD (Type or Print)

UAS Approval

Approved by

Date

Rev. 08/2025

FORM INSTRUCTIONS

- Use this form to pay individuals who are receiving financial support from an academic or professional development program administered by the UAS.

- This form should be used for students of financial support include:
  -Scholarship,fellowship, financial assistance grant, training grant,
  -Reimbursement of tuition, registration fees, textbooks, and other education costs
  -Attendance at workshops and seminars
  -Achieving academic milestones

- There is no obligation or services required of the stipend recipient other than to remain enrolled in a degree program (if required by the program) and maintain qualifying requirements of the award.

- This is form can not be used for payment of services or independent contractors.

- First time payees must fill out a Payee Data Record form.

- Answer all questions on the form and complete the "Reason for Stipend" section.

- The stipend recipient signs and dates the form.

- The Principal Investigator and Post Award Administrator signs and dates the form.

- This form will serve in lieu of a check request.

- Cal State LA students need to attach a copy of approved and signed Coordination of Aid form.

- If you receive any other form of compensation from CSULA, you are responsible to disclose it to your Project Director.