

STIPEND PAYMENT REQUEST FORM Project Reader

SCHOOL FOR PROFESSIONAL STUDIES Prompt legible submission facilitates prompt payment

<u>27240-55111</u>

GRAD EMP

| AP OFFICE USE ONLY: | | | | |
|---------------------|--|--|--|--|
| AP TYPE | | | | |
| DATE VOUCHED: | | | | |
| DATE DUE: | | | | |
| VOUCHER # | | | | |
| | | | | |

| PLEASE PRINT OR TYPE ~ Send original forms to: Mail Code P-8, Regis University, 7600 E. Orchard Rd. Ste. 100N, Englewood, CO 80111 | | | | |
|---|----------------------|----------------------|------------------|--|
| Course | | | | |
| Year Semester : Fall S | Spring Summer Summer | Academic Period: 8w1 | □ 8w2 □ | |
| Course Subject Code Course # Sect | tion# Title | | Semester Hours | |
| Project Reader Information | | | | |
| Payee: | SS# | Stipend | Amount \$ 50.00 | |
| Type: 1099 (Independent Contractor) | | | | |
| Home Address | | Phone# | | |
| City State Z | Zip E-mail | | | |
| | | | | |
| Student | | | | |
| Student: | Home Phone | Regis Em | ployee? Yes No | |
| Address | | Work Phone | | |
| City Stat | e Zip | E-mail | | |
| ID#: | Faculty Advisor: | | | |
| Agreement | | | | |
| Upon submission of this form all parties agree to the terms as outlined herein and/or on the attached documents. Regis University will pay the above stipend after the grade recommendation is submitted to Regis University. The Payee agrees to a contract that is temporary in nature; thus, it carries no fringe benefits and no guarantee of a continuation of any role for the Payee after this particular course, with this particular student, is complete. | | | | |
| | | | | |
| Internal Use Only | | | | |
| Authorization to Pay: | | | | |
| Budget Manager: | Date: | | | |
| Budget# (A/P Office use only) UG Independent Contractor □17240-64360 | | | | |

GRAD Independent Contractor 27240-64360