Ś	TUDENT S	TIPEND PA	YMENT RE	QU	EST FO	RM 21				Page	e of
Hol- Dep Cor	YMENT DUE DATE d at Bursar: partment Name: ntact Phone Number count Number to be	r:				* CITIZENSHIP STATUS - Please enter the appropriate number in the *CS column  1 = US Citizen (Attach IRS form W9)  2 = Permanent Resident (Attach Form UPP-192 with Permanent Resident Card and IRS form W9)  3 = Nonresident Alien (Attach Form UPP-192 with supporting documents and IRS Form W-8BEN-S)  **Submit Nonresident Aliens on separate sheet from US Citizens and Permanent Residents**					
	Voucher Number	Social Security			1	_				1	
	(Payroll use only)	Number	Student ID#	*CS	Last Name	First Name	Address	City	St	Zip	Payment Amount
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
				-		•		•	·		
Au	thorized by (Prir	nt Name)	Sig	gnatu	ıre		Signature Auth. #		Phone	No.	Date

## Instructions:

To issue a **SINGLE** check: Enter the TOTAL GROSS amount on the form for each student and indicate the payment due date To Issue MULTIPLE checks: Prepare a separate form for each check amount and indicate the payment due date