



UNIVERSITY OF UTAH

SCHOLARSHIP/FELLOWSHIP/TRAINESHIP PAYMENT REQUEST FORM

[Form Instructions](#)

SECTION I - RECIPIENT INFORMATION

Payee Name:		UNID -or- Last 4 digits of SOC. SEC. # and W9:
Is this payment contingent upon the payee performing any kind of service to The University? Yes <input type="checkbox"/> No <input type="checkbox"/> (If Yes, submit through Payroll.)		Is recipient a nonresident alien? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, country of residence: _____ If Yes, has nonresident completed registration with Tax Services? Yes <input type="checkbox"/> No <input type="checkbox"/>
Is this payment for a currently enrolled, matriculated UofU student? Yes <input type="checkbox"/> No <input type="checkbox"/> (If Yes, then this may be required to pay via the Scholarship Administration System.)		Is the recipient paid salary or wages on a project which this payment is to be made from? Yes <input type="checkbox"/> No <input type="checkbox"/> <small>(If 'Yes' and funding is 'Participant Support Costs', then recipient cannot be paid a stipend)</small>
Is this payment for a current UofU employee? Yes <input type="checkbox"/> No <input type="checkbox"/> <small>(If yes, and if the payment is conditioned on employee status, then this may be required to pay via the Payroll system).</small>		
Department Address:		

SECTION II - PAYMENT EXPLANATION

Provide a brief explanation of what this payment is for. See [instructions](#) for example explanations. Include why payment qualifies as a scholarship, fellowship or traineeship. - For department funded scholarships and fellowships, also attach the award letter.

Important Payment Notes: See the [Educational Payments Decision Document](#) and specific [instructions](#) for this form. When only two payments are required, submit two separate requests in [ePR](#), using the **invoice date** to set the desired date of payment processing. When three or more payments are required, submit this form only once and complete the recurring payment section below. The first payment will be paid on the **invoice date** indicated in [ePR](#) and subsequent payments will be scheduled by Accounts Payable. The request submitted in [ePR](#) should always match the chartfields and the initial payment amount listed below. Subsequent scheduled payments will be released on the **first of each month**. When three or more payments are requested for a US resident, the payments must be made via direct deposit. For these, please include a completed [Educational Recurring Direct Deposit Authorization Form](#).

SECTION III - PAYMENT INFORMATION

Initial Payment Date (ePR Invoice Date):	First Recurring Month:	Final Payment Month:
--	------------------------	----------------------

Primary Chartfield:							Supplemental Chartfield:						
BU	ORG	FUND	ACTIVITY	PROJECT	ACCOUNT	A/U	BU	ORG	FUND	ACTIVITY	PROJECT	ACCOUNT	A/U

Initial Payment:	ePR Amount:	
Recurring Payment: Quantity \$ Total		
Final Payment:		
Scheduled Total:		
Activity/Project Total:		

ePR Total:	+	Scheduled Total:	=	Grand Total:
------------	---	------------------	---	--------------

SECTION IV - ATTESTATION

Authorized Signers: An Account Executive (or authorized alternate) in [GFA](#) with the responsibility to approve and commit University funds must review and sign this form.

According to [IRS Topic No 421](#), A scholarship is generally an amount paid or allowed to a student at an educational institution for the purpose of study. A fellowship grant is generally an amount paid or allowed to an individual for the purpose of study or research. Some fellowships/traineeships are qualified (non-taxable) while others are non-qualified (taxable). Any taxes or reporting requirements associated with a fellowship/traineeship grant are the responsibility of the recipient. I attest that this payment meets the definition of a scholarship, fellowship or traineeship and that the recipient has been notified that the university will not report to the IRS qualified, non-qualified scholarship, fellowship or traineeship payments made to U.S. citizens or U.S. resident aliens, or withhold tax from these payments. In addition, my signature certifies that no services to the University, past, present, or future are required from this recipient.

Date:	Authorized Signatory on the above chartfield:	Print Signor's Name, UNID, and Email Address

Signature Verified By