CALIFORNIA STATE UNIVERSITY
EAST BAY

STIPEND DISBURSEMENT REQUEST

Principal Investigator: _____

Project Title: _____

Peoplesoft Chartfield: _____

Fund - Dept ID - Project

Recipient Name	Address	Email	Net ID	Semester & Year	Amount
					0.00

What is the purpose for the stipends and the benefit to the program?

____ Recipient meets program stipend eligibility requirements.
____ Recipient is current on all program requirements and is eligible to receive the requested disbursement.

____ Additional Institutional responsibilities (Attach award terms and conditions for student repayment instructions)

Principal Investigator / Project Director Signature Date

ORSP Signature Date