



Direct student financial support | payments certification

This form is for direct financial support payments — scholarship and fellowship payments coded to student support sometimes referred to as stipends and expense reimbursements — paid through the Payables and Reimbursements department and not through the Financial Aid system to regularly enrolled ASU students.

For payments made in this manner, no services — including research-related services — can be provided by or required of the student. For assistance in determining what constitutes services, please review the guidelines provided by ASU Financial Services in the [Stipend guide](#) as well as [FIN 422-01](#).

If services are required to be provided to ASU or a third party, such as an internship, payments must be made through the ASU payroll system unless the service qualifies as independent contractor services detailed in [FIN 421-01](#).

Student name: _____

Student ID or Supplier ID: _____

Mailing address for payment: _____

Stipend amount: _____

Reimbursement amount: _____

Department: _____

Will the individual be physically present in the United States during this program or activity?

- Yes
- No, please provide the country the individual will be participating from:

If the individual will be in the U.S., is the individual considered a resident for U.S. tax purposes? This includes U.S. citizens, Permanent Residents, and individuals who have passed the Internal Revenue Service substantial presence test.

- Yes
- No, attach either the alien data collection form with associated attachments *or* a current Glacier summary if the individual has an active ASU Glacier account.*

*Students who are physically in the U.S. during the program or activity may have up to 30% of their support withheld and remitted to the IRS. This withholding will be reflected on an IRS Form 1042-S that will be issued following the end of the calendar year.

Student Certification

I certify that the above information is true and accurate to the best of my knowledge and that I am not required to perform services as a condition of receiving this payment.

Student signature: _____ Date: _____

Certification | To be completed by an authorized department representative:

This payment is for student financial support to a degree-seeking student where no services, including research-related services, to either ASU or another organization are provided by or required of the student.*

Department representative name: _____

Signature: _____ Date: _____

*A financial support payment for a student to do research, solely for his or her thesis needed for his or her degree where the research is not for the research of a faculty member or needed for a research project, does not constitute research services being required of the student and, therefore, can be paid as a student non-employee financial support payment.