



This form is for direct financial support payments – scholarship and fellowship payments coded to student support, which are 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 for compensation, see the guidelines provided by ASU Financial Services at <http://www.asu.edu/fs/TaxDept/chart/Guideintro.html>

If any services are required to either ASU or another organization, such as an internship, the payments must be made through the Payroll Office as employee compensation, unless the service clearly qualifies as student independent contractor services. The very limited number of such services must follow the established independent contractor requirements of Financial Services policy FIN 421-01 "Guest Lecturers, Consultants, and Other Independent Contractors," including submitting the Employee/Independent Contractor Determination checklist and approval received in advance of the start of work, and coding the payment to the relevant spend category. Any exception to this must be provided in writing by the ASU Tax Department.

Direct financial support payments at ASU are sometimes referred to as stipends, which per Webster’s Dictionary, are sometimes defined as wages. At ASU, stipends are defined as a sum of money periodically paid and can be either employee or independent contractor compensation, or financial support – scholarship or fellowship – payment, depending on the payment’s specific circumstances of and purpose. Only financial support types of payments, sometimes referred to as stipends, not requiring any services may be paid through the use of this form.

Student name: \_\_\_\_\_

Student ID | or Supplier ID of non-ASU student: \_\_\_\_\_

Stipend amount: \_\_\_\_\_

Reimbursement amount: \_\_\_\_\_

Department: \_\_\_\_\_

Is the participant a U.S. citizen, resident alien or permanent resident?

Yes

No. This payment may be subject to withholding. Please complete the alien data collection form and attach the required documents listed on that form.

Student signature: \_\_\_\_\_

**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.<sup>1</sup>

Department representative name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<sup>1</sup>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.