



Accounting Services
6000 J Street * Modoc Hall Suite 3001 * Sacramento CA 95819
(916) 278-4679

Payment to Student Request Form

This form needs to be approved by Accounting Services before making an agreement with a student.

Department: _____ Dept ID: _____ Fund: _____

How many students will be paid: _____ How often will students be paid: _____

When are payments expected to be made: _____ Fund Source: _____

Describe reason for paying student:

Will the student do something to receive the funds: _____ If so, what will they do?

Are the funds contingent on completion of educational milestones:
If so, what educational milestones are needed?

Do you want these funds to apply to student debt if applicable:

Please choose a category of payment type from the list below: _____
(If unsure please contact Accounting Services.)

Categories of Payments:

1. Wages – These items are reportable on the W-2 or a 1099
 - a. Student Assistant Pay, pay to offset cost of work performed, Payment for performance, Payment as a thank you for helping a department with a project (Previously referred to as a stipend).

2. Awards/Prizes – These Items are reported on 1099 M
 - a. Raffle Drawings, Best project/paper awards, survey participants give aways
 - b. Gift Cards given as prizes are reportable to AP no matter the amount given.
 - c. Awards (Contest Winnings) and Prizes may be money, but also may be tangible items, both need to be reported.

3. Reimbursements – Not Reportable for tax purposes
 - a. Travel, Mileage, Food, direct program, or project related expenses (this does not include personal expenses for projects and programs only expenses that have business purpose)

4. Scholarships – These are reported on the 1098T
 - a. Qualified Scholarships cover tuition and related fees
 - b. Non-Qualified Scholarships cover multiple items: Emergency grants, books, other fees, basic needs, ASI scholarships, Project Rebound, Food, etc.

Name of Requester: _____ Email Address: _____

Signature: _____ Phone #: _____

Reviewed and Approved:

	Name	Signature	Date
Department Chair:			
Dean/Director			
Provost/Vice President			

If you have questions, please contact Accounting Services. paymentstostudents@csus.edu

Accounting Services Approver: _____ Date: _____