



**Payroll Authorization  
STIPEND**

<b>Authorization for Payment of Stipend</b>		
Employee Name		
Position Title		
Department		
Position Reports to		
Start Date		
End Date		
Work Schedule	hours per week (approximately)	
Total Amount of Stipend	\$	
To be Paid <i>(in the closest bi-weekly payroll to the option selected)</i>	<input type="checkbox"/> quarterly throughout the employment term <input type="checkbox"/> middle and end of the employment term <input type="checkbox"/> end of the employment term	
Salary Account and Distribution	% %	
<b>Approval</b>	<b>Signature</b>	<b>Date</b>
Department or Budget Unit Head		
Dean (if academic unit)		
Human Resources Manager		

cc: Associate VP Finance & Treasurer

Instructions:

*This form is to be utilized for payment of individuals who are hired to complete a specific project or task. A lump sum is authorized as payment for the work; however, it is important to include (as close as possible) the number of hours associated with the project, averaged on a weekly basis, should we be required to complete a Record of Employment for the employee.*

*Employees who are approved for a stipend payment are entitled to nothing more than the stipend itself, less mandatory deductions for EI and CPP; no additional benefits are provided through this appointment.*

*Please complete the information required, and circulate the form to collect signatures in the order given to authorize payment.*