

2009-10 PREDOCTORAL TRAINEESHIP FORM

Use this form for NSF (IGERT) Traineeships and PHS/NIH Individual Fellowships (F31/F30)

Mail forms to your department's Graduate Fellowship Contact in OGS, M/C 0003.

Trainee: _____ Funding Dept _____
(Last name) (First name) (Middle Initial)

PID # _____ Major Dept (if different) _____

Student is: New or Continuing AND Cal. Resident or Nonresident

Award is: New Renewal Revised

STIPEND	Begin Date	End Date	Monthly Pymt.	Total	check if New Index*	Index/Org./Fund
_____	_____	_____	\$ _____	\$ _____	<input type="checkbox"/>	_____
<small>SAM detail Code OGS use only</small>						

_____	_____	_____	\$ _____	\$ _____	<input type="checkbox"/>	_____
<small>SAM detail Code OGS use only</small>						

FEES	Fall 09	Winter 10	Spring 10	Total	check if New Index*	Index/Org./Fund
_____	\$ _____	\$ _____	\$ _____	\$ _____	<input type="checkbox"/>	_____
<small>SAM detail Code OGS use only</small>						

TUITION	Fall 09	Winter 10	Spring 10	Total	check if New Index*	Index/Org./Fund
_____	\$ _____	\$ _____	\$ _____	\$ _____	<input type="checkbox"/>	_____
<small>SAM detail code OGS use only</small>						

Comments: _____

* New Index - Please submit form one month prior to month of expected payment.

SUPPLEMENTAL STIPEND FROM NON-PREDOCTORAL TRAINEESHIP FUNDS

STIPEND	Begin Date	End Date	Monthly Pymt.	Total	check if New Index	Index/Org./Fund
_____	_____	_____	\$ _____	\$ _____	<input type="checkbox"/>	_____
<small>SAM detail code OGS use only</small>						

Is student receiving employment ? **Yes **If YES - Please submit the Compensation Form No
(GSR, TA, Assoc., Reader)

Signature of Home Department <small>(Reqd. when home dept. is different from funding dept.)</small>	Ext./Mail Code	Date
Award submitted by	Ext./Mail Code	Date

Required Attachments: Patent Agreement Compensation Form
(check box if submitting with this form) (new trainees only) (only if employed)

For OGS use only: APPT Letter Ordered Date: _____ Initials: _____