



RESEARCH STIPEND CONTRACT

PAYEE INFORMATION		
Date:		
Kean ID:	Phone Number:	
Student Name:		
Street Address:		
City:	State:	Zip:
Have you ever been employed at Kean? Yes No		

DESCRIPTION
Payment of stipend for research performed on the project entitled _____ for the _____ semester.

PAYMENT DETAILS
Total Stipend amount to be paid: \$
Amount to be paid per pay period: \$
Pay Period in which to begin payments (per attached schedule):

FUNDING INFORMATION		
Fund #:	Cost Center #:	Object Code #:

APPROVALS	
1. PD/PI:	Date:
Print Name:	Date:
2. Dean:	Date:
Print Name:	Date:
3. ORSP:	Date:
Print Name:	Date: