

Incentive Payment Request Form

SECTION 1: GENERAL INFORMATION		
Department Name:	Contact Name:	Contact Phone Number:

SECTION 2: INCENTIVE PAYMENT REQUEST QUESTIONS		
Question:	YES	NO
Is incentive payment request in compliance with FPI 2-10, Research, Survey and Other Related incentives?		
Does the study fulfill the University's mission?		
Is incentive payment request related to research?		
Will incentive payment request be on a "21 /Recharge" account?		
Are sufficient funds available in the account to cover the payment?		
Are tax reporting requirements noted within FPI 2-10 (i.e. confirming if employee or student payment needs to process through payroll or accounts payable) being followed?		

- If you answered "No" to any of the above questions, work with either your Fiscal Officer (Non-53 account requests) or Grant Accountant (53 account requests) to complete remainder of form.
- If you answered "yes" to all questions in Section 2, complete Sections 3 & 4 and obtain signatures.

SECTION 3: INCENTIVE PAYMENT PURPOSE (Attach information to this form if there isn't enough space below)
Please provide a brief description of the study or survey:
Describe how the participants/recipients of the incentive were selected:

SECTION 4: INCENTIVE PAYMENT INFORMATION	
Type of Incentive (Gift Card, Cash, or Check)	Comments:
Account Number:	
IACUC/IRB # (if applicable)	
Number of Participants:	
Amount per Participant:	
Total amount requested (#of participants x \$ amount per participant):	

- Research Incentives being paid through E & G must be approved by the CFO, and will only be approved on a case by case basis where the requesting department has a compelling business purpose. The request must be in writing to the CFO, and approved before the Incentive Request Form is completed. The approved request is then to be attached to this Incentive Request Form.
- Incentives in the form of Gift Certificates or Gift Cards must follow Gift Card Process through Procurement Services.
- 53 Accounts are responsible for insuring that payment is allowable under terms of Grant/Sponsored Programs.
- Submit completed form and support to Business Financial Services.
- Form must be completed and approved prior to disbursing incentives

Requesting Departments are Responsible for the Incentive Payment and following FPI 2-10			
REQUIRED SIGNATURES (NON-53 ACCOUNTS)		REQUIRED SIGNATURES (53 ACCOUNTS)	
_____	Date	_____	Date
Requesting Department Signature		Principal Investigator's Signature	
_____	Date	_____	Date
Department Fiscal Officer Signature		Grants Accountant Signature	
_____	Date	_____	Date
CFO/Business Financial Services		Office of Sponsored Programs	