



Brandeis University
Graduate Student
Payment Form

Prepared by: _____
Title: _____
Date: mm/dd/yy Extension: _____

Effective Date: mm/dd/yy Stop Date: mm/dd/yy

Name: _____
first middle initial last

GENDER ☐ Male ☐ Female SSN: _____ Birth Date: mm/dd/yy Country of Residence: _____

CITIZENSHIP STATUS ☐ Citizen ☐ Non-Citizen VISA TYPE ☐ F-1 ☐ F-2 ☐ J-1 ☐ J-2 ☐ Other Visa Expiration Date: mm/dd/yy ☐ Alien Registration Receipt Card (Green Card)

Non-resident aliens should contact the Payroll Office for supplemental forms

Current US Home Address

Address 1: _____
Address 2: _____
Address 3: _____
City: _____
State: _____ Zip: _____
Telephone: _____

Foreign Address [required if non-resident alien]

Address 1: _____
Address 2: _____
Address 3: _____
City: _____
Country: _____
Postal Code: _____

ACTION ☐ Labor distribution change (check if applicable)

Department: _____ DeptID: _____ 00 Mail Stop: _____

Semi-monthly Rate: _____ Annual Salary: _____ Months per year: _____

	Position #	Acct. (4)	Fund (2)	DeptID (5)	Program(5)	Proj/Grant(6,9)	Amount	%
Fellowship		5321						
Fellowship		5321						
Fellowship		5321						
Total:							0	100%
Research Assistantship		6181						
Research Assistantship		6181						
Research Assistantship		6181						
Total:							0	100%
Teaching Fellow		6181						
Teaching Fellow		6181						
Teaching Fellow		6181						
Total:							0	100%
Course Assistant (GSAS)		6181						
Other		6181						
Total:							0	100%

Remarks:

Signatures:

PI/Supervisor/Dept Admin _____ Date _____ Sponsored Programs Accounting _____ Date _____

School Authorization (required) _____ Date _____ Other _____ Date _____

Labor distribution changes for graduate students cannot be done on the Position Change Form. Use this form instead.