

**DATA COLLECTION FORM
Scholarship / Fellowship**

The IRS defines scholarship or fellowship as an amount paid or allowed to, or for the benefit of a student at an educational institution or a researcher to aid in the pursuit of independent educational activity, study or research. A fellowship is generally an amount paid for the benefit of an individual to aid in the pursuit of graduate study or research. See IRS publication 970 (Tax Benefits for Education) for more information.

Please complete and forward this document along with all corresponding documentation (payment request, recipient award letter, payment schedule, etc.) and forward it to the OTPS Team at the Research Foundation of CUNY.

1. Recipient's Name (leave items 1, 2, 3 blank for multiple recipients. Complete the payees list form on page 2)

Last First Middle Initial

2. Recipient's Social Security (SSN) or Individual Taxpayer ID (ITIN) number (Not CUNY student number)

3. Total Dollar Amount of Award \$ _____

4. Is the recipient enrolled in a degree program? () Yes () No

5. Type of Program: () Undergraduate () Graduate () Other, Please Explain _____

<p>6. Is teaching or any form of services required as a condition for receiving a scholarship/fellowship?</p> <p style="text-align:center">() Yes () No</p> <p>7. If required, does research, teaching or other services benefit the grantor?</p> <p style="text-align:center">() Yes () No</p> <p><i>If the answer to questions 6 or 7 is Yes, then the full payment or the service-related portion of the payment is considered compensation and not a non-service scholarship or fellowship.</i></p> <p>Please review RFCUNY Human Resources compensation guidelines on how to process service payments.</p>

8. Is the recipient also being supported by a federal or federal pass-thru award? () Yes () No
If yes, provide, RF account # _____ Period of Support: From _____ To _____ Amount \$ _____

Notes:

*****US Residency Requirements:** If the recipient is not a US citizen or Permanent Resident (Green Card Holder), form RF702 must be completed by the recipient of scholarship/fellowship and submitted to RF with this form.

If the answers provided for Items (4)-(7) on the form apply to ALL scholarship/fellowship recipients in the group one Data Collection Form can be used.
Attach list of students' names, addresses, SSN, and amounts to pay (use page 2).

<p>_____</p> <p>Project Director (Signature)</p>	<p>_____</p> <p>Date</p>
<p><i>I certify that all of the information provided is true and correct.</i></p>	

