

Incentive Payment Request Form

Business & Financial Services
555 Howes Street
Fort Collins, CO 80523

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 mission?		
Is incentive payment request related to research?		
Will incentive payment request not be on a 21 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 Campus Services Representative (non-53 account requests) or Sponsored Programs Contact (53 account requests)
- If you answered “Yes” to all questions in Section 2, complete Section 3

SECTION 3: INCENTIVE PAYMENT INFORMATION	
Description:	Comments:
Purpose of study:	
Account number:	
Number of participants:	
Amount per participant:	
Total amount requested (# of participants x amount per participant):	

PLEASE SUBMIT FORM TO YOUR CAMPUS SERVICES REPRESENTATIVE (NON-53 REQUESTS) OR TO SPONSORED PROGRAMS (53 REQUESTS) PRIOR TO ATTACHING TO DISBURSEMENT VOUCHER

For Campus Services and Sponsored Programs Use Only:	
_____	_____
Approval Signature	Date