

**Office of Postdoctoral Affairs
Request for Salary Payment for Trainees on
Ruth Kirschstein NRSA and Other Training Awards**

Type Appointment:

_____ Postdoctoral Clinical Fellow
_____ Postdoctoral Research Fellow _____ Postdoctoral Residency Fellow

Administrative Department/Center/Institute: _____

Trainee Name: _____

Current Stipend: \$ _____ Training Award No. _____

Training Account No. _____ Budget Period of Award: _____

Department/Center/Institute to supplement stipend (as salary) _____

Account No. _____ Award No. _____

Amount \$ _____ Period of Payment: _____

Hours per week: _____ (may not exceed 10 hrs/week)

Name/telephone number of individual to answer questions regarding this payment: _____

Provide scientific justification for the above payment (attach additional paper if more room is required); include indication of fellow's additional responsibilities) _____

Approvals:

_____ Name/Signature of Chair/Director approving salary payment.
Date: _____ *I agree to appoint the above individual as a Part time Postdoctoral Research Scientist/Scholar for the above amount and period in my Department/Center/Institute and will prepare the appropriate Nomination form.*

_____ Name/Signature of current PI signifying that additional
Date: _____ responsibilities will not interfere with current training program

_____ Name/Signature of Chair/Director of current administrative.
Date: _____ department

_____ Name/Signature Research Administration certifying salary
Date: _____ payment is allowable under the terms of the above awards

Approved/Denied:

_____ Office of Postdoctoral Affairs
Date: _____

Instructions: Complete this form, obtain all necessary signatures and mail/fax to Office of Postdoctoral Affairs. If approved, this form will be returned to the Department/Center/Institute providing the salary for preparation of a Nomination form. The completed/fully signed Nomination form, together with this "Request for Salary Payment for Trainees" form should be sent to the Administrative Department for approval and then forwarded to the Office of Faculty Affairs (CUMC Campus)/the appropriate Vice President and/or Dean (MSD Campus) for appropriate action.