

Return to Julie Simmons,
irs262@uga.edu, no later
than April 7, 2016. Failure
to do so will result in an
academic hold on the
student's records.



GRADUATE STUDENT SUPPORT FORM For Fiscal Year

Minimum monthly pay is \$1875.00, Maximum monthly pay is \$2,500.00

Student: **Degree Status:**

Last Name First Name (MS or PhD)

Advisor:

EXAMPLE:

Funding Source: **Account Number:**

Effective Dates: **Monthly Pay:**

(Specify if from a federal agency, e.g. NIH, NSF, DOE, Otherwise, note State, Non-profit Private, or For-profit private.)

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[Business Manager--Name: _____ Phone: _____ Email: _____]

Advisor's Signature

Date

Special Instructions: