



gradorg.syr.edu

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## GSO Grant Payment Request Form

This form must be submitted, with receipts, within 30 days of the travel date, or within 30 days of receiving your award letter, whichever is later. Submit this form and supporting receipts to the GSO Comptroller in Lyman 303. If using mail, send to Lyman 304.

Name: \_\_\_\_\_ Email: \_\_\_\_\_

SUID: \_\_\_\_\_ SSN: \_\_\_\_\_

Degree:      MS                  PhD                  Other: \_\_\_\_\_

Local Address: \_\_\_\_\_  
\_\_\_\_\_

Citizenship Status:                  US Citizen                  Resident Alien                  Nonresident Alien

Country of Residence: \_\_\_\_\_ Visa Type (nonresident aliens): \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_  
\_\_\_\_\_

Payment Amount: \$ \_\_\_\_\_ Dates of Travel: \_\_\_\_\_ to \_\_\_\_\_

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**For Office Use Only**

GSO Comptroller Signature

Date

\_\_\_\_\_  
Fund                  Dept                  Program                  Account                  Mycode