



CONFIRMATION OF FACULTY STIPEND FOR DEFINED PROJECTS

TO BE COMPLETED BY ACADEMIC DEPARTMENT (PRIOR TO PROJECT START)

Dear _____:

By countersigning on the line provided below, you will indicate your acceptance of the assignment and the proposed stipend payment for the project specified, under the terms stated below, pursuant to the 2017-2023 Collective Bargaining Agreement between The City University of New York and the Professional Staff Congress/CUNY. The terms of the stipend payment are:

Campus: _____

Title of Project to Be Completed: _____

Project Start Date: _____ Due Date for Completion: _____

Stipend Payment Amount: _____ Date of Confirmation: _____

College President or Designee Name (*print*): _____

College President or Designee Signature: _____

TO BE COMPLETED BY FACULTY MEMBER (PRIOR TO PROJECT START)

Name (*print*): _____

CUNY ID¹: _____ City/State ID²: _____

Full-Time Faculty Title: _____

By signing below, I agree to the terms of the above project:

Signature: _____ Date: _____

TO BE COMPLETED BY COLLEGE OF ACADEMIC AFFAIRS/COLLEGE PROVOST (AFTER PROJECT COMPLETION)

Project Completion Date: _____ Payment Approval Date: _____

College President or Designee Name (*print*): _____

College President or Designee Signature: _____

The Provost's Office should submit this form to the College HR Office as expeditiously as possible. The College HR Office will forward the form to University Payroll via Tumbleweed. Payment of the stipend will be made within two pay periods following receipt of this form by University Payroll.

¹ This is your ID, which is used for CUNYfirst.

² Your City or State ID is found on your paystub.