

## STUDENT GRANT SUPPORT FORM

Office of Research and Sponsored Programs Holthusen Hall 341 http://www.marquette.edu/orsp

**INSTRUCTIONS:** Complete this form to request tuition credits to be paid to a student from a grant. Email the completed form to postaward@marquette.edu.

## SECTION 1: STUDENT INFORMATION

lent's Last Name		First Name			Middle Initial			
: ( Graduate) (	Undergr	adua	ate) ( Law Scho	ol) ( D	ental S	chool)		
PRINCIPAL INV	/ESTIGAT	ГOF	R INFORMATION	N				
PI's Last Name			First Name			Middle Initial		
or			Grant Start and	End Dates				
for each session an	d complete	the	account number ar	id number	of crea	dits.		
FALL	у	ear	SPRING		year	SUMMER		year
Continuation Course	e 🗌 Yes-10	)0	Continuation Cours	se 🗌 Yes-S	\$100			
Account #	Credits or \$		Account #	Credits or \$		Account #	Credits or \$	
stigator's Signature I Signer)					_ Date			_
eted By an signer)			Phone Ext.		I	Date		
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## SUBMIT COMPLETED FORM TO postaward@marquette.edu

ORSP Use Only:	
Item Type:	
Award Entered On:	By:
Posted to Student Account:	
Comments:	

\*\*\*This form is designed to allows PI's and Authorized Signers to request multiple semesters of credits during the <u>current</u> <u>academic year only</u>. In the event credits have been applied to a students account and they do not work on your project, the PI must contact ORSP to have those credits reversed.