



MEMORANDUM

TO: Grant/Project Managers, Laney College
Cc: Tammeil Y. Gilkerson, Ed.D., President, Laney College
FROM: Derek Pinto, Ed.D., Vice President Administrative Services, Laney College
DATE: September 25, 2018
SUBJECT: Directions Stipend Approval Form

Background & Purpose

The **Stipend Approval Form** was created to allow for better tracking of stipend work. It should remain on file in the Grant/Project Manager's Office for reference purposes.

The form is fillable and should be completed:

- **before** any work is started
- **should not** overlap with other grant work or the recipient's primary responsibilities (courses, office hours, assigned schedules being completed)
- **begins only** when **all approval signatures** have been collected. However, as this form is new, it can be used to track work that is already in progress.

Directions

- The form should trigger a corresponding ePAF by the Dean/Cost Center manager
- **First Name/Last Name; Semester/Academic Year; Grant/Manager** cells to be completed
- Timesheets need to be completed for "flat rate" or "hourly rate" whichever is more appropriate
- **"Flat Rate Stipend"** work
 - Timesheet should be completed when work is complete
 - **Category** box should be checked
 - **Duties/Responsibilities & Deliverables/Outcomes** – attach second sheet if necessary
 - Insert dollar figure in the **"Stipend Rate"** cell
 - Initial in the **"Project Complete"** cell when project is complete



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- **“Hourly Rate Stipend”** Section
 - Timesheet should be submitted monthly
 - Cells should be completed as in the **Flat Rate Stipend** section
 - The **number of hours** and **total stipend** should be indicated
 - Insert dollar rate per hour figure in the **“Other Rate”** cell
- **Approval Signatures:** Form should be printed and each of the responsible parties should sign. **Faculty Member/Date; Supervisor’s Approval/Date; Project Manager’s Approval/Date.**



Laney College
STIPEND APPROVAL FORM

Directions: Please complete this form before work is started on any project where compensation will be granted in the form of a stipend. Work should not begin prior to all approval signatures on the form are completed. All hours claimed must not overlap with other work on a different grant or during primary work responsibilities (scheduled courses, office hours, assigned schedule).

First Name	Last Name	Semester/Academic Year	Grant Project Name	Grant Program Manager/Coordinator	
Flat Rate Stipend (Timesheet to be submitted after work is completed and verified)					
CATEGORIES	DUTIES/RESPONSIBILITIES	DELIVERABLES/OUTCOMES		STIPEND RATE	PROJECT COMPLETE
Community of Practice/ Inquiry Group					
SLO Assessment (PT)					
Faculty Evaluation Contractual (PT/FT)					
Course Update					
Meeting/Retreat					
Other:					
Hourly Rate Stipend (Timesheets to be submitted monthly)					
CATEGORIES	DUTIES/RESPONSIBILITIES	DELIVERABLES/OUTCOMES		OTHER RATE	PROJECT COMPLETE
Placement Review					
New Course Development (PT)					
New Program Development (PT)					
Program/Project Coordination					
Other:					
Approval Signatures					
Faculty Member	Date	Direct Supervisor’s Approval	Date	Grant or Project Manager’s Approval	Date

09/20/18