Arkansas State University – Jonesboro Sponsored Programs Accounting Tuition Remission Statement

*Please include this form with the Student Payment Request Form

Date:	Si	tudent Name:		
Princi	pal Investigator:			
Pleas	e check all that apply	:		
	This student has been approved by the graduate school to be a graduate research assistant.			
	This student is enrolled in a degree program that is related to the field of study of the award(s).			
	This student is performed the award(s).	orming duties that	t are necessary for performa	ance of
	Please list the FOAP(s) and the percentages that are currently used to pay the student:			
FOAP				%
FOAP				%
FOAP				%
	The tuition remission must be in proportion to the salary distribution for the entire academic session (Fall, Spring, Summer I or Summer II). If the salary distribution changes, the PI must coordinate with Sponsored Programs to change the tuition payment distribution.			
	PI Signature		Da	 te