NEW YORK CITY
COLLEGE OF TECHNOLOGY
THE CITY UNIVERSITY OF NEW YORK

300 JAY STREET, BROOKLYN, NY 11201 -2983

NYC College of Technology
Summer Salary 2019
Office of Sponsored Programs Form

Please complete this form to receive summer salary payment(s) for conducting grant activities during the summer. Salary will be authorized on a monthly basis.

Summer salary recipient: _____
Signature

_____
Print name

Chairperson: _____
Signature

I attest that I will be working on grant activities for the dates indicated below. I have submitted a Multiple Position summer salary form to my department chair which includes summer salary from this/these grant funded project(s). I will provide a copy of my approved Multiple Position form to OSP if I am teaching at the same time as requested summer salary.

RF Grant Number: _____

Principal Investigator (PI):

_____ _____
Signature Date

Date	Salary Amount	Fringe 28%
June 1-15	$_____	$ 0.00
June 16-30	$_____	$ 0.00
July 1-15	$_____	$ 0.00
July 16-31	$_____	$ 0.00
August 1-15	$_____	$ 0.00
August 16-31	$_____	$ 0.00

Total salary $ 0.00
Total fringe $ 0.00
Total to charge grant $ 0.00

Entered
_____
_____
_____
_____
_____
_____
Grants Office Use Only

Total salary June: $ 0.00
Total salary July: $ 0.00
Total salary August: $ 0.00

RF Grant Number: _____

Principal Investigator (PI):

_____ _____
Signature Date

Date	Salary Amount	Fringe 28%
June 1-15	$_____	$ 0.00
June 16-30	$_____	$ 0.00
July 1-15	$_____	$ 0.00
July 16-31	$_____	$ 0.00
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August 16-31	$_____	$ 0.00

Total salary $ 0.00
Total fringe $ 0.00
Total to charge grant $ 0.00

Entered
_____
_____
_____
_____
_____
_____
Grants Office Use Only

Total salary June: $ 0.00
Total salary July: $ 0.00
Total salary August: $ 0.00

GRAND TOTAL $ 0.00 = Salary $ 0.00 + Fringe $ 0.00

The RF has instituted an online effort reporting system to certify summer salary instead of using paper PAR forms. During the month of September the PI must log onto rfcuny.org and certify summer salary. OSP will send out reminders in September.

Encumbrance entered
_____
Grants Office Use Only