

**SAMPLE**  
**SJSU Research Foundation Non-Service Stipend  
Award and Acceptance Letter (Non-Student)**

**Date:** \_\_\_\_\_  
**Recipient Name:** \_\_\_\_\_  
**Recipient Physical Address (no P.O. Box):** \_\_\_\_\_  
**Recipient Phone Number:** +\_\_ (\_\_\_\_) \_\_\_\_\_

**Re: Stipend Award Grant Number** \_\_\_\_\_

Dear \_\_\_\_\_:

Congratulations! You have been selected to receive a stipend award for the period from:  
to: \_\_\_\_\_ for the project \_\_\_\_\_ at San José State University  
Research Foundation, which is funded by the agency, \_\_\_\_\_. In order to remain  
eligible for this award, you must agree to the following conditions: **(Please note: A true stipend is a payment made to  
an individual for their attendance or participation only, NOT for services rendered. The payments cannot be tied to  
“any obligation for past, present, or future services.” There can be no employer/employee relationship associated  
with the stipend payment. There are no fringe benefits associated with a stipend payment as they are NOT for  
services rendered.)** List all conditions:

Condition 1: \_\_\_\_\_  
Condition 2: \_\_\_\_\_  
Condition 3: \_\_\_\_\_

The total amount of the award is \$\_\_\_\_\_, to be paid (monthly, on a schedule, or one-time). This payment will be  
processed via ACH (direct deposit), which requires a W-9 and a Supplier Form.

Sincerely,

\_\_\_\_\_  
Signature of Principal Investigator

\_\_\_\_\_  
Name of Principal Investigator

**AWARD ACCEPTANCE**

Your signature below certifies the following:

- I have read and agree to the conditions stipulated above and do hereby accept this award.
- I understand that this award does not represent payment for services required as a condition of the grant.
- I am a legal resident or citizen of the United States.
- I **am** an SJSU or Research Foundation Employee: \_\_\_Yes \_\_\_No  
(Please note: If you are an SJSU or SJSURF employee, your payment must be processed through payroll. This  
requires a completed appointment form.)
- I am **not a student**, and I am aware that the stipend award I receive may be considered taxable income and that  
San José State University Research Foundation is required by the IRS to report this payment if the total award  
amount exceeds \$600 per calendar year (1099).

\_\_\_\_\_  
Signature of Recipient

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date