2008 FACULTY SUMMER SALARY REQUEST FORM

Date:	
Name (please print):	
Signature:	
Funding Authorization ¹	
	(please print and sign name here)

I am requesting summer support from the following projects identified below:

	NYU Account number(s)	Percentage Effort	Signature Principal Investigator ²	Amount
JUNE				
JULY				
AUGUST				

Routing: Please return the completed form to Karen Micallef, Room 923, Warren Weaver Hall by May 16, 2008 (specifically for June summer salary).

¹ The SPO who serves as budget officer verifies that sufficient funding exists in the account. ² Should the source of funds be other than your own, the PI signs as approval next to month requested.