



**STUDENT GRANT SUPPORT FORM**

Revised 9/23/2019

Office of Research and Sponsored Programs  
Holthusen Hall 341  
<http://www.marquette.edu/orsp>

**INSTRUCTIONS:** Complete this form to request tuition credits to be paid to a student from a grant. Email the completed form to [postaward@marquette.edu](mailto:postaward@marquette.edu).

**SECTION 1: STUDENT INFORMATION**

Student's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

MUID \_\_\_\_\_

Student Status: ( Graduate) ( Undergraduate) ( Law School) ( Dental School)

**SECTION 2: PRINCIPAL INVESTIGATOR INFORMATION**

PI's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Grant Sponsor \_\_\_\_\_ Grant Start and End Dates \_\_\_\_\_

Enter the year for each session and complete the account number and number of credits.

	FALL	year	SPRING	year	SUMMER	year
	Continuation Course <input type="checkbox"/> Yes-100		Continuation Course <input type="checkbox"/> Yes-\$100			
Charge to:	Account #	Credits or \$	Account #	Credits or \$	Account #	Credits or \$
Grant						
Cost Share						
ORSP						

Principal Investigator's Signature \_\_\_\_\_ Date \_\_\_\_\_  
(or Authorized Signer)

Form Completed By \_\_\_\_\_ Phone Ext. \_\_\_\_\_ Date \_\_\_\_\_  
(if different than signer)

**SUBMIT COMPLETED FORM TO [postaward@marquette.edu](mailto:postaward@marquette.edu)**

ORSP Use Only:	
Item Type:	
Award Entered On:	By:
Posted to Student Account:	
Comments:	

\*\*\*This form is designed to allow PI's and Authorized Signers to request multiple semesters of credits during the current academic year only. In the event credits have been applied to a student's account and they do not work on your project, the PI must contact ORSP to have those credits reversed.