

Directed Independent Studies

This form is to be completed to process Directed Independent Studies payments through UFV Payroll. Please send the completed form to payroll@ufv.ca.

Requestor Information

Requestor name: _____

Faculty/Department: _____ Local: _____

Semester: _____

Course & Instructor Information

Payments will be processed through payroll for the below listed instructors (attach class and student details). Please see the most current [tuition/credit rates](#) for information.

Faculty P/T position number: Budget code:

Course/CRN	Credits	Number of students	Instructor	Total payment for course
			Total	\$ 0.00

Authorization

Spending authority name (dean's office): _____

Signature: _____ Date: _____

Send the completed form to payroll@ufv.ca

Questions? Contact your Financial Analyst & Liaison | finance.liaisons@ufv.ca