UNM Department of Anthropology

Request to Issue Graduate Award

Please submit completed request to JoNella Vasquez for processing; this form is required for accounting verification purposes

Requestor:			Date:	_ Date:		
I certify that this/these awa committee.	rds were made w	vith full knowledge a	nd consultation with th	ne appropriate subfie	ld and/or the graduate	
Signature of requestor or gr	aduate committe	ee member:				
	T					
Student Full Legal Name	Banner ID	Enrollment Status*	Award Name	Award Period	Total Award Amount	

- <1/2 time (less than 6 hours)
- 1/2 time (6 hours)
- 3/4 time (9 hours)
- full time (12 or more hours)
- full time with GA/TA (12 or more hours)

^{*} Enrollment status options: