

Instructions for Undergraduate Student Resources Reporting

The Undergraduate Student Resources Reporting (UGRR) form is used to request payment of a scholarship or any resource to a current undergraduate student. **Wages should not be processed on this form.**

Federal and State regulations and University Policies 4425 and 4440 require that any type of financial assistance (e.g., grants, scholarships, fellowships, stipends, fee awards, loans, etc.), especially awards, prizes, and scholarships funded from University controlled resources (i.e., funds appearing in the general ledger), be reported to the Office of Financial Aid and Scholarships for all UCSB students whether or not they receive financial aid. This information is used for the University’s Corporate Student Systems Report for UCOP.

Form Number and Submission Process

Submit forms via e-mail to: FinaidResource@sa.ucsb.edu Paper forms are not accepted. Subject line should be the form number. The Naming convention to create form number is as follows:

Official UCSB Department code/fiscal month/submission #

Example: Financial Aid submission in the month of August for the third submission of the month the form number would be FINA/2/3.

Account and Ledger Information

Payments must be charged to a Student Aid Account (78XXXX). The account and fund must be set up and linked in PeopleSOFT. An object code is required:

ACCEPTABLE OBJECT CODE	VALID SUB CODE	INVALID SUB CODE
7216	5 or 7	0,1,2 and 3
7770	5, 7 or 3	0, 1and 2

Restricted Awards

Only use restricted awards when required by your funding source. Restricted awards can’t be used to pay balances on BARC, while unrestricted awards may be used to pay any BARC balance the student owes. Students generally prefer unrestricted awards that pay their bill automatically instead of receiving a check and still needing to pay an outstanding balance.

Quarter Total

The Quarter Total is the cumulative quarter total from the same resource. We use this to ensure that awards paid over multiple disbursements are disbursed correctly, and to identify potential duplicate requests.

- Example – You first award \$200 for fall quarter – the quarter total is \$200. A month later you report \$100 for the same student, same award, same quarter – the quarter total is \$300.

Authorization Signatures

Authorization signatures are required. UGRR forms with missing authorizations cannot be processed. Your signature authorizes the payment and certifies that you have verified student registration status, academic standing and information listed on the form.

Processing times: May to October are typically one month. 7-10 days November to April. New awards take 1-2 weeks extra.

Disbursements

OFAS pays awards daily beginning 10 days before the first day of classes. BARC sends refunds to students twice per week. Students not meeting academic standards by OFAS or their college can’t receive disbursements. Contact OFAS if you are unsure if a student is currently eligible to receive the payment.

Graduate Student Resources

This process is for undergraduate students. Contact Graduate Division for payments to graduate students.

2020-2021 UNDERGRADUATE STUDENT RESOURCE DISBURSEMENT FORM

Submit by May 1st for processing by Fiscal Close

Form Number (_____/_____/_____)
 Dept Fiscal Month Submission

Resource Title _____ (e.g. ABC Award, NSF REU, etc.)	New Account Request <input type="checkbox"/> Restricted Fund <input type="checkbox"/> Unrestricted Fund	Acct & Ledger Info: <u>7 8</u> _____ / _____ / _____ / _____ <div style="text-align: center; font-size: small;"> Account Fund Sub Object </div>
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Perm Number	Name	Enrollment	2020-21 Quarterly Award Amount(s)				
				Fall 2020	Winter 2021	Spring 2021	Summer 2021
		Enrolled full-time <input type="checkbox"/>	Payment Amount:	\$ _____	\$ _____	\$ _____	\$ _____
		Pay if not full-time <input type="checkbox"/>	Quarter Total:	\$ _____	\$ _____	\$ _____	\$ _____
		Enrolled full-time <input type="checkbox"/>	Payment Amount:	\$ _____	\$ _____	\$ _____	\$ _____
		Pay if not full-time <input type="checkbox"/>	Quarter Total:	\$ _____	\$ _____	\$ _____	\$ _____
		Enrolled full-time <input type="checkbox"/>	Payment Amount:	\$ _____	\$ _____	\$ _____	\$ _____
		Pay if not full-time <input type="checkbox"/>	Quarter Total:	\$ _____	\$ _____	\$ _____	\$ _____
		Enrolled full-time <input type="checkbox"/>	Payment Amount:	\$ _____	\$ _____	\$ _____	\$ _____
		Pay if not full-time <input type="checkbox"/>	Quarter Total:	\$ _____	\$ _____	\$ _____	\$ _____
		Enrolled full-time <input type="checkbox"/>	Payment Amount:	\$ _____	\$ _____	\$ _____	\$ _____
		Pay if not full-time <input type="checkbox"/>	Quarter Total:	\$ _____	\$ _____	\$ _____	\$ _____

Comments:

*By my signature here I have verified the registration status, academic standing, and qualifications of the student(s) listed above and I authorize the Office of Financial Aid and Scholarships to disburse the indicated funds.

Prepared By: _____ Ext. _____ Authorized by*: _____ Signature _____ Department _____ Ext. _____ Date _____

OFFICE OF FINANCIAL AID AND SCHOLARSHIPS USE ONLY

Fund Code: _____ Class Code: _____ Processed by: _____ Date: _____