



Request to Pay Student Tuition & Fees

Student Name _____

Student UIN _____

Faculty Name _____

Account Number _____

(Must Have Account Number prior to turning in form)

Please check which term this is for. A separate form must be completed for each semester.

_____ **Fall** _____ **Spring** _____ **Summer**

Tuition and Fees for the above name student will be paid in accordance with the new Tuition and Fee guidelines for FY20.

Student Signature _____ Date _____

Faculty Signature _____ Date _____

***** IMPORTANT: PLEASE ATTACH A COPY OF YOUR FEE STATEMENT WHEN SUBMITTING THIS FORM!! *****