

INTERNAL BILLING AUTHORIZATION

DIRECTIONS—Use this form to set up internal billing authorizations on student accounts. Authorizations must be submitted before the due date of the first student bill. (Please go to http://www.onestop.umn.edu/onestop/Tuition_Billing/wwhpay.html for applicable payment due dates. Late payment fees and installment/re-billing fees that result from submitting authorizations after the first student due date will not be waived. If you want to provide authorization for more than one student, you may attach a list with the names, student ID numbers, and maximum dollar amounts for any students not listed in Section B. Go to http://www.d.umn.edu/registrar/tuition_and_fees.html for tuition and fee rates.

Please return completed form to:
 Student Accounts Receivable
 Window 15, Lobby Darland Admin. Bldg.
 University of Minnesota, Duluth
 1049 University Dr.
 Duluth, MN 55812-3011
 Telephone: 218-726-7190
 Fax: 218-726-8607
 E-mail: stars@d.umn.edu

Please type or print neatly in blue or black ink.

SECTION A: Department information		
Department name	College	
Contact name	Phone number	Contact person's e-mail
Chartfield string		
SECTION B: Student information		
Name (last, first, middle initial)	Student ID number	
Authorized terms (check all that apply): <input type="checkbox"/> fall term 20____(year) <input type="checkbox"/> spring term 20____(year) <input type="checkbox"/> May/summer term 20____(year)		
If the award is authorized for multiple years: <input type="checkbox"/> fall term <input type="checkbox"/> spring term 20____ to: <input type="checkbox"/> fall term <input type="checkbox"/> spring term 20____(year)		
SECTION C: Authorized coverage		
If applicable, check the internal billing category that corresponds to the charges you want to set up for internal billing. Enter the maximum dollar amounts that the department will pay for each specific charge.		
Internal billing categories	Maximum \$ amount	Additional information:
<input type="checkbox"/> Academic/technology fees	\$	
<input type="checkbox"/> Course fees	\$	
<input type="checkbox"/> Late payment and installment plan/re-billing fees	\$	
<input type="checkbox"/> Late registration fees	\$	
<input type="checkbox"/> Optional fees	\$	
<input type="checkbox"/> Required fees	\$	
<input type="checkbox"/> Health insurance	\$	
<input type="checkbox"/> Tuition	\$	
<input type="checkbox"/> Other (please specify)	\$	



To request copies of this form in an alternative format, please call the Disabilities Services liaison for financial aid at 612-625-9578. The University of Minnesota is an equal opportunity employer and educator. This form is printed on paper made from no less than 20 percent post-consumer waste.

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