

# IOWA STATE UNIVERSITY

OF SCIENCE AND TECHNOLOGY

## Billing Authorization for Sponsored Students

(Note for international sponsors only: Iowa State University assesses a fee to international sponsoring agencies as a way to compensate for the special record keeping, billing requirements, correspondence, and the deferred payment option extended to sponsoring agencies. The current fee is 5% of the total tuition charge billed to the sponsor. This fee may be raised after 90 days advance notice to the sponsoring agency.)

### Student Information

|                         |                        |                      |               |
|-------------------------|------------------------|----------------------|---------------|
| Name of Student         |                        |                      |               |
| <i>(as in passport)</i> | <i>Last (surname)</i>  | <i>First (given)</i> | <i>Middle</i> |
| Date of birth           | Semester/year of entry | University ID        |               |
| <i>(mm/dd/yyyy)</i>     | <i>(ex: Fall 2012)</i> |                      |               |

### Billing Authorization

We hereby authorize Iowa State University to bill our agency for the following charges:

- Tuition
- Intensive English & Orientation fee
- University room and board
- Mandatory fees
- Special course fees
- University health insurance
- Bookstore charges
- Graduation fee
- Thesis fee

#### Please return this form to:

Accounts Receivable Office  
0880 Beardshear Hall  
Iowa State University  
Ames, IA 50011  
E-mail: kvandyke@iastate.edu  
Telephone: 515-294-5461  
Fax: 515-294-3196

Sponsored student's authorization number (if any)

Dates of contract

*(beginning date)*

*(ending date)*

Is this student allowed to accept on-campus employment?  Yes  No

Is this student allowed to enroll part-time if necessary?  Yes  No

### Sponsor Information

|                                       |                      |
|---------------------------------------|----------------------|
| Name of sponsoring agency             |                      |
| Mailing address                       |                      |
| Billing address <i>(if different)</i> |                      |
| Contact person                        |                      |
| <i>last (surname)</i>                 | <i>first (given)</i> |
| Contact's e-mail                      | Telephone            |
| Name of signatory                     | Title                |
| Signature                             | Date                 |