THIRD PARTY BILLING AUTHORIZATION

To authorize the Office of Student Accounts at the University of Nebraska Lincoln to bill a third party for a student’s charges and credit the student’s account, the following information is required:

Name and Address of Sponsor

Billing Address (if different)

Sponsor Billing Contact Name

Phone Number

Email Address

Student’s Name and Student ID Number

List of charges covered (tuition, fees, housing, health insurance) and any limits on credit hours or dollar amounts covered.

Duration of Sponsorship – Start Date ____________  End Date ____________
or until completion of degree _____

I agree to have the Office of Student Accounts bill the charges as outlined above to the sponsor and credit that amount to the above named student’s account. All invoices received from the Office of Student Accounts are due 30 days from date of invoice.

Sponsor Authorized Signature ________________ Date ____________

For Student Account Use Only
Cost  Obj ct ___________________
Item Type _____________________
Org # _______________________