STUDENT THIRD PARTY BILLING INFORMATION RELEASE

ATTN: STUDENT

We have received a billing authorization from a third party sponsor. This sponsor has agreed to pay all or part of the charges on your student account; however, they require an invoice be sent to them with your student account activity and current class schedule.

We are not able to credit your account or send them this information without your consent. Please sign and date below giving us the authority to release information about your account to your sponsor, then return at your earliest convenience to: Office of Students Accounts, 124 Canfield Admin Building, P.O. Box 880413, Lincoln NE 68588-0413.

If your sponsor does not honor their commitment, you will be held ultimately responsible for the payment of your student account.

CAUTION: It is your responsibility to continue to review your monthly billing statements for accuracy and for any amount due even when you have a sponsor.

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I have read the above and agree to authorize the Office of Student Accounts to release my account information and class schedule to the third party sponsor I have named below.

Student Signature _________________________                 Date _________________
Student ID # ______________________
Third Party Sponsor _____________________________________________________

124 Canfield Admin Building / P.O. 880413 / Lincoln, NE  68588-0413
(402) 472-2887 / FAX (402) 472-2959