SPONSORSHIP BILLING AUTHORIZATION FORM

This form is to be completed by the organization or institution providing financial support for the student listed below at the College of Eastern Idaho (CEI). Please return completed form to the Cashier's Office or email to cashier.office@cei.edu or by fax to 208.524.0429.

A. SPONSOR INFORMATION

Company Name:		
Contact Name:		
Address:		City:
Postal Code:	Contact Phone #:	Fax:
*Email		

*Invoices will be emailed to this address

B. STUDENT INFORMATION

First Name	Last Name	Student ID

*Please note a privacy release is required to discuss any information regarding the students account
*If more space is needed, please attach an addendum page

C. DURATION OF SPONSORSHIP

Select sponsored term. Complete a new form for each term.

Term		Year	Maximum Amount (if applicable)
	Fall (Aug-Dec)	20____	$_____
	Spring (Jan-May)	20____	$_____
	Summer (June-July)	20____	$_____

*Tuition and Fee Deadlines can be found on the Academic Calendar

D. SPONSOR BILLING CATEGORIES

Please indicate the fee you authorize to pay			
	Tuition		Technology Fee (Mandatory)
	Course Fee		Graduation Fee
	Out of District Fee		Online Fee
	Other Fees (Please specify):		
	Specific Courses Only? If Yes, please list courses:		

The technology fee is a mandatory charge assessed to students. Course fees are required fees that are assessed in addition to tuition for specific courses. Out of District fee can be paid by the student's county of residence if eligible.

The above-named company/organization understands that the College will bill them directly for all student fees and agreements selected above. Any fees that are not covered by the sponsor will be billed directly to the student and will be the student's responsibility for payment. Invoices will be processed after the established refund deadline dates and prior to the end of the semester. All payments are due within thirty (30) days of issuance.

E. AUTHORIZATION

I authorize the College of Eastern Idaho to invoice the charges as outlined:

Authorized Name & Title:	
Signature:	Date: