

LAKE MICHIGAN COLLEGE

Third-Party Pay - Employer Sponsored Payment TUITION/BOOKSTORE PAYMENT AUTHORIZATION

_____ will pay: Tuition and Fees maximum amount: _____
 Tuition and Fees 100%
 Books/Supplies maximum amount: _____
 (ADDRESS) _____

Upon invoicing by Lake Michigan College for _____ semester _____ for the following employee:
 (Year)

 (EMPLOYEE NAME) _____

 (SOCIAL SECURITY NUMBER)

 (STUDENT ID)

To have your credit card charged, please complete:

 (NAME ON CREDIT CARD) _____

 (CREDIT CARD NUMBER)

 (SEC. CODE) _____

 (EXP. DATE) _____

 AUTHORIZED SIGNATURE

CLASS / COURSE INFORMATION: AUTHORIZED CLASSES:

 (APPRENTICESHIP NUMBER) _____

 (APPRENTICE COORDINATOR SIGNATURE)

SEND INVOICE TO:

 (ORGANIZATION REPRESENTATIVE) _____

 (TITLE)

 (STREET ADDRESS) _____

 (CITY) _____ STATE _____ ZIP _____

 (REPRESENTATIVE'S SIGNATURE) _____

 (DATE) _____ (TELEPHONE) _____

 (E-MAIL ADDRESS)

NOTICE: Organization representative's signature commits the organization to payment of the total payment due when billed, subject to policies outlined in the Lake Michigan College catalog. This commitment remains whether or not the employee continues employment with the organization, withdraws, or passes the class with a satisfactory grade. This completed form is due to Lake Michigan College at the time of registration in order to prevent student from being dropped for non-payment.

Please mail this form to: Lake Michigan College, Attn: Accounts Receivable, 2755 E. Napier Ave., Benton Harbor, MI 49022, or fax to (269) 927-8103. If you have questions please call (269) 927-6141