

Credit Card Authorization

This is to authorize the debit of your credit card for the service(s) specified below (check one).

- Degree Audit Letter Proof of Enrollment
- Graduation Application Request for Official Transcript
- Other _____
(specify)

Student ID:	Student Name:
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Credit Card Information

Check one only: MasterCard Visa *

** We cannot accept Visa debit cards remotely*

Amount for Service(s): \$ _____

Name of Cardholder (please print) Cardholder's Signature

Credit Card Number:

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Credit Card Expiry Date:

M	M	Y	Y

PLEASE NOTE:

In order to process your credit card payment, this form MUST accompany the requested service form (ie. Proof of Enrollment, Request for Official Transcript, etc.)