

I have presented Student Administrative Services with documentation authorizing them to bill a third party for my tuition and fees. I understand that the University will send an invoice, reflecting the information above, to them and upon payment will reverse **LATE PAYMENT CHARGES** on my account that are applicable to that payment.

I agree to notify Office of Student Administrative Services, 141 Black Building, in case of any changes of program or withdrawal.

I understand that this statement does *not* relieve me from any financial responsibilities at Columbia University and that I *will* receive monthly invoices from Columbia. If payment is not received from the third party in a timely fashion, I will pay for my tuition, fees, and any **LATE PAYMENT CHARGES** that may have accrued on my account.

I understand that I will not be allowed to register for the following semester or receive diplomas and transcripts unless my account is paid in full.

I agree the information is true and correct to the best of my knowledge.

Signature

Date