

UCI SUMMER SESSION
2018 RECHARGE AUTHORIZATION FORM

COMPLETE FORM IN INK

STUDENT INFORMATION

Student Name	_____
	(Last, First Middle)
Student ID	_____

FEE INFORMATION

Program/Course Fees	\$	_____
Mandatory Campus Fee	\$	_____
Other Admin Fees (i.e. late fee, materials fee)	\$	_____
Total		\$ _____

AUTHORIZATION

I agree to allow Summer Session to recharge the account listed for the amount and reason(s) indicated above.

Account Manager Name	_____
UCI Email Address	_____
UCI Telephone	(949) 824- _____
KFS Account	_____
	KFS ACCOUNT NUMBER - PROJECT
KFS Account Name	_____
Account Manager Signature	_____
Date	_____

NOTES

For Students:

This original form must be submitted with an enrollment form prior to Summer Session deadlines. Incomplete forms will not be accepted.

For Departments/Programs:

If more space is needed for multiple students, please attach a list.

Summer Session recharges in KFS in early Fall quarter.

Make a copy of this form for your office records. Student submits original form to Summer Session.

In order to ensure the integrity of the form and the authorizing signatures, forms with alterations such as white-outs or cross-outs will not be accepted.