



# PACIFIC STATES UNIVERSITY

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www.psuca.edu



## Credit Card Payment Form

### Directions:

1. Fill out the form legibly and completely. Submit the form with payment.
2. Allow five (5) working days for receipt(s). NOTE: Delays in processing may occur during both grading and registration periods.

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### STUDENT INFORMATION

Please indicate the Quarter:	Year:	( ) Fall	( ) Winter	( ) Spring	( ) Summer
Student ID Number:		Degree & Major:			
( ) Mr. ( ) Ms.					
Name: _____					
(Last Name)		(First Name)		(Middle Name)	
Date of Birth: (Month / Day / Year)			Country of Birth:		
Citizenship:			Telephone #:		
Current Address:					

<b>Amount of Payment:</b>	US\$ _____
Application Fee (Non-Refundable)	US\$ _____
Total Course ( ) – Tuition	US\$ _____
Housing	US\$ _____
Other (Specify _____)	US\$ _____
<b>TOTAL AMOUNT DUE</b>	

<b>Method of Payment:</b>
Credit Card: ( ) VISA or ( ) MasterCard
Credit card number: _____ Expiration date ____/____
SC(Security codes): _____(3 or 4 digit security code on the back)

Student Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

### FOR OFFICE USE ONLY

<b>Financial Affairs Officer:</b>		<b>Registrar:</b>	
Balance Past Due:	\$	Recorded Date:	
Amount Paid:	\$	Comments:	
Receipt #:		Approved by:	
Approved by:			