

Company Billing Authorization

Please complete form and mail to:

Owens Community College Attn: Billings Specialist

30335 Oregon Road Perrysburg OH 43551

NEW MAILING ADDRESS

Or email to: thirdparty@owens.edu

For more information, call (567) 661-7859.

For Office Use Only Date entered By

General Information

Authorization is valid for one semester only.

Semester: Fa

Fall

Spring

Summer

Year

Organization

Phone

Fax

Company ID

Street

City

Zip

Contact Person

Campus:

Toledo-area

Findlay-area

E-mail

Please email invoices:

Yes

State

No

*Tuition rates are subject to change based upon Board of Trustees approval.

Costs eligible for billing	Percentage	Maximum
Tuition: \$188.00 per credit hour	%	\$
Non General Fees	%	\$
Lab Fees	%	\$
Registration Fee	%	\$
Parking Fee	%	\$
Textbooks	%	\$
Supplies	%	\$
Application Fee: \$20	%	\$
Academic Service Support Fee: \$110	%	\$
New Student Orientation Fee: \$65	%	\$
Late Registration Fee: \$50	%	\$
Misc:	%	\$
Total	%	\$

Use financial aid first? Yes No

List any billing requirements:



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Authorization for release of student grade (please check one)

Grades are not to be distributed to the organization.

Grades are to be distributed to the organization. (If checked, then Owens Community College requires the signatures of each student who is to be enrolled.)

The student(s) signing below hereby authorize Owens Community College to release grades to their employer and/or organization at the conclusion of the semester indicated below. Also, by signing below, the student(s) gives Owens Community College the permission to discuss with their employer and/or organization information regarding their financial aid and/or student account and is aware that the privacy of the aforementioned information would otherwise be protected by Federal law and not accessible to an employer and/or organization.

Semester:	Fall	Spring	Summer	Year	
Student's	s Name	(print)		OCID Number	Student's Signature (required)



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The following signature authorizes Owens Community College to bill your organization/company for the costs indicated on the previous page, for the listed student(s). In the event that any listed student(s) should terminate or be terminated with your organization/company, and the student(s) is not officially withdrawn prior to the start of classes, or drops classes anytime during the semester, your organization/company agrees to honor its financial obligation to the College. Owens Community College has the right to rescind your authorization at the College's discretion.

The company signed below accepts responsibility for any tuition, fees or other expenses incurred by registering for the class(es) noted on the attached sheet(s). If the account is unpaid it may referred to the Ohio State Attorney General's Office for further collections, resulting in additional fees and interest that the student agrees to pay.

College Representative	Organization-Authorized Signature			
College Authorization	Title	Date		