

Request for Payment / Reimbursement of Fees for VUW course

Date:	
Student ID Number:	
Last Name:	
First Name:	
Student Signature:	

Please Note:

If this payment will leave your student account in credit, please contact Student Finance at student-finance@vuw.ac.nz

Course Subject	Course Number	CRN	Tuition Fee

Cost to be charged to:

Cost Centre:		Account Code:		Project Code:	
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OR

Award Code:		Grant/Project Code:		Task Code:	1
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Reason for Payment / Reimbursement:

Manager Approval:

Name (*printed please*)

Signature

Position

Dated

SAS Approval:

Name (*printed please*)

Signature

Position

Dated

Fees Advisor Use

Date Actioned:	
Actioned by Fees Advisor:	
Journal sent to fsaccount@vuw.ac.nz (excluding GST)?	

Please forward completed form to: Student Finance HU103 or student-finance@vuw.ac.nz