



Student Finance
Lansing Community College
309 N Washington Sq, Ste 200
Lansing, MI 48933
517-483-1200, Option 3
LCC-ThirdPartyBilling@star.lcc.edu

Multiple Student Authorization Form

Date: _____ Company Name: _____

Company Sponsor Contact Person: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____

Email: _____

Semester & Year: _____

*A new authorization form is needed for every semester. Multiple Terms CANNOT be on the same authorization letter/form.

☐ Apprenticeship (if applicable)

Name of Apprenticeship: _____

**Only select Amount per Course or Total Amount, not both*

Student Name	LCC Student #	DOB xx/xx/xx	*Amount per Course	Total Amount	Apply Gift Aid First?

By signing below, our company accepts the financial obligation of Tuition/Fees for the employee/student as indicated above. We understand that our company is responsible for payment of all tuition/fee charges even if the employee/student drops classes during LCC's 50% refund period or LCC's 0% refund period. Authorizations may be revoked at any time however, must be done so in writing and at least one (1) week prior to the start of the semester to absolve the financial obligation listed here.

PAYMENT IS DUE WITHIN 30 DAYS OF RECEIPT OF INVOICE

AUTHORIZED SIGNATURE: _____

TIN (tax id number): _____

Lansing Community College is an equal opportunity, educational institution/employer.