

REQUEST FOR PAYMENT PLAN CHANGE

*Use this form if changing payment plan AFTER May 31st
A \$50 processing fee must be submitted at the time of this request*

Select new payment plan

- One Payment Plan
- Two Payment Plan
- Monthly Payment Plan
- Financial Aid **With Automatic** Deduction Payment Plan
- Financial Aid **Without Automatic** Deduction Payment Plan

Student Signature

Print Student Name

Hall/Room/Bed# _____

Accounting Use Only:

Date: _____

Method of Payment: _____

Receipt Number: _____

Amount Rec'd: _____

Original Payment Plan _____

New Payment Plan _____

Changes made in Odyssey: Yes No ____ Initials

New Payment Letter Sent: Yes No ____ Initials

AB#: _____

Invoice: _____

Credit: _____

Spread: _____

Initials: _____

Please refer any questions regarding this form to University Courtyard accounting at (559) 278-2396.
5152 N. Barton Ave. M/S RH82, Fresno, CA 93740, 559.278.2396, Fax 559.408.5530.
www.universitycourtyard.org