

PAYMENT DEFERMENT REQUEST FORM FOR GLOBAL EXPERIENCES

Student Section:

I understand that I am ultimately responsible for ensuring that my study abroad program fees are paid in full. I understand that if financial aid payments are not made by the payment due dates, I am fully liable for any late fees as assigned by the study abroad program provider. I authorize my Financial Aid Office to release the disbursement information requested below to:

_____.
Program Provider

Student ID Number

Student Name (printed)

Student Signature

Date

Date: _____

To Study Abroad Administration at: _____
Program Provider

This form is to verify that _____ is a University of Pittsburgh student who is eligible for financial aid funding during the _____ term(s) abroad. The following itemization lists the funding sources, amounts **after** disbursement fees, and **estimated** disbursement dates.

Types of Aid	Amount after Disbursement Fees	Estimated Disbursement Date

*Please note that all payments are disbursed **directly to the student**.

Program fees: _____

Total aid available: _____

Financial Aid Administrator Name

Telephone Number

E-mail Address

Financial Aid Administrator Signature

Date