

AUGSBURG COLLEGE

Itemized Statement Request Form

Student Name _____
Last First M.I.

Augsburg ID# _____ Daytime Phone _____

Current Program: Day WEC Grad Rochester United

Term to be reviewed (choose only one): Fall Winter Spring Summer

Academic Year: 20____ - _____

The following information will be included in the statement:

Course name, number, and credit value

Start and end date

Final grade (if posted)

Tuition and fee charges (including bookstore accounts)

Any financial aid applied toward the term's charges

Any out-of-pocket payments applied toward the term's charges

Any tuition discounts or refunds applied toward the term's charges

This is the college's standard itemized statement. We will not accept requests to delete any of the above information from the statement.

I authorize Augsburg College to release this information to the address below.

Student Signature

Date

___ Email PDF to my AugNet account. OR Mail or Fax to:

*Fax completed form to 612.330.1308.
Allow up to four business days to process request.*

9/25/2009