



Nebraska Indian Community College

STUDENT REQUEST FORM

DATE: _____ STUDENT NAME: _____

SSN: _____

	Transcripts	Other college bill	Graduation fees	Other
Check all that Apply				

To whom: _____

Address: _____

Amount: _____

By signing below you authorize NICC to add the charges listed above to your NICC Student bill. Financial aid that you receive during this term will be used to pay this debt.

Student _____ Date _____	Received by _____ Date _____
Date rec'd by Student Billing _____ Initials _____	Student Billing _____ Date posted _____

(Staff: Once the student signs, authorizing the charge, please fill out a Purchase Requisition and attach this form as documentation. All completed Purchase Requisitions and documentation need to be forwarded on to Accounts Payable.)