

# Tuition Payment Authorization Letter

Date: [Insert Date]

[College/University Name]

Office of Student Accounts

[College/University Address]

[City, State, Zip Code]

Dear [Office of Student Accounts/Financial Aid Office],

I, [Your Name], a student at [College/University Name], with student ID [Your Student ID], hereby authorize [Name of Third-party Sponsor], located at [Address of Third-party Sponsor], to make tuition payment on my behalf for the academic term [Insert Term/Year].

I understand that this authorization allows the above-mentioned third-party sponsor to pay the specified tuition fees directly to [College/University Name].

Please find attached any required documents provided by the third-party sponsor for your records.

Should you require any further information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your assistance in this matter.

Sincerely,

[Your Signature (if submitting in hard copy)]

[Your Printed Name]

[Your Address]

[City, State, Zip Code]