

CREDIT CARD AUTHORIZATION FORM

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Application number:		
Student:(LAST NAME/ SURNAME)		
(LAST NAME/ SURNAME)	(FIRST NAME)	(MIDDLE NAME)
☐ \$75.00 Application fee		
☐ \$50.00 Reapplication fee		
Express mail service, if you would like to receive yo	our I-20 by express mail se	rvice please register and pay for the mailing
cost at https://study.eshipglobal.com/home/?q=s		
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Phone Number:	Email Address:	
Cardholder Signature:		Date:
Applicant's Comments:		

You can fax or mail to the address below. You can also pay in person at:

English Language Institute, University of Utah

540 Arapeen Dr., Room 110, Salt Lake City, UT 84108 USA • Phone: 1-801-581-4600 • Fax: 1-801-585-9449

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For office use only: Deposit #40871