

# Billing Statement Request

Georgia Institute of Technology  
Bursar's Office, Atlanta, GA 30332-0255  
[bursar.ask@business.gatech.edu](mailto:bursar.ask@business.gatech.edu), Fax 404-894-5536

Please fill out the form completely and be sure to include your signature.  
You may fax, mail, or scan/email the form back to our office. Please allow up  
to 3 business days for the request to be processed.

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## PERSONAL INFORMATION

Print Name:

PRINT NAME AS IT APPEARS ON GEORGIA TECH RECORDS

GT ID # or SSN:

If SSN, Last 4 Digits ONLY

Phone Number:

Date of Birth:

Email Address:

Semester(s) to be included:

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## Billing Statement Order Information

\_\_\_\_\_ Will pick-up at the Bursar's Office

\_\_\_\_\_ Mail to \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Other (please explain) \_\_\_\_\_  
\_\_\_\_\_

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Student's Printed Name

Student's Signature

Date