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**Payment for Special Events Insurance  
Fee for Student Travel**



Credit to (SMED) Cost Center DQX009, Account 44451

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Student must submit payment to Fiscal Services and return the receipt to the organizing department **prior** to departure.

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Today's Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
Last First Middle

Student's Banner ID Number: @ \_\_\_\_\_

Organizing Department: \_\_\_\_\_

Date(s) of university organized or sponsored activity/event: \_\_\_\_\_

Total number of days coverage is desired: \_\_\_\_\_ (cost for coverage is \$5.00 per day)

Cash

Check/Money Order Number \_\_\_\_\_

Master Card/Discover (credit card charge applied)

Total fee paid by the student: \$ \_\_\_\_\_ (fee is non-refundable)

Fiscal Services Validation: \_\_\_\_\_ Receipt: \_\_\_\_\_

UTSAE VPSA 10/2019

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