

TUITION PAYMENT PLAN ADJUSTMENT FORM

STUDENT NAME (PRINT)

CUID #

AMOUNT

PLEASE **INCREASE** MY BUDGET BY THE AMOUNT SHOWN ABOVE

PLEASE **DECREASE** MY BUDGET BY THE AMOUNT SHOWN ABOVE

SIGNATURE

DATE

OFFICE USE ONLY

POSTED BY

DATE

PRINT AND MAIL FORM TO ADDRESS BELOW

University Revenue & Receivables
Tuition Payment Plan
G-08 Sikes Hall
Box 345307
Clemson, SC 29634-5307