

REQUEST FOR NEW ACCOUNTS RECEIVABLE DETAIL CODE

| То: | Director of Student Accounts Date: Office of the University Bursar (0143) Student Services Building, Suite 150, Virginia Tech 800 Washington Street SW Blacksburg VA 24061 bursar@vt.edu |
|--|---|
| From: | |
| | (Department) |
| Department requests a new Accounts Receivable Detail Code to bill for | |
| (Descript | tion of goods or services to be billed and/or name of Study Abroad trip and term. Example: Study Abroad/England) |
| Fund | e Fund, Account and Organization to credit: |
| To be completed for Study Abroad Detail Code Requests Only | |
| Charges to Students: Are charges for the Study Abroad trip to be assessed to all students in the program or plan of study? (Title IV Federal Financial aid will only apply to educational charges assessed in this manner.) Yes No | |
| If yes , please list the charges and amounts that will be assessed to each student in the program/plan of study: | |
| | |
| | (Description of Charge) (Amount) |

I certify that I am authorized by my department to request detail codes, which are required for entering charges to the Accounts Receivable system for billing purposes.

(Department Contact – Print Name)

(Department Contact – Signature)

Bursar's Office Use Only

Detail Code Assigned:_____

Date Completed:

Completed By:

(Phone Number and Email)

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