California State University, Fresno
Craig School of Business
International Business Programs

ONE-ON-ONE EXCHANGE PROGRAM
REGISTRATION PAYMENT APPROVAL FORM

Student Name: _____ Student ID #:_____--_____--_____
Last First Middle

Name of Host
University/Location: _____

Student must pay California State University, Fresno fees prior to the start of each exchange semester (and by their fee payment date). Additionally, the student needs to provide funds for room and board, and personal expenses (see breakdown below). Please, indicate who will be responsible for payment for each semester.

Estimated semester costs:

Registration fee	$ 3,143.50 (updated on Spring 2015)
Housing and meals	$ 3,500.00 (varies depending on locations)
Personal expenses	$ 5,000.00 (varies depending on locations)
TOTAL estimated costs	$ 11,643.50

_____I will pay by the due date with my Personal Funds.
_____I will use my Financial Aid Award.
_____I will use my Scholarship Award.
_____The person named below has agreed to be responsible for the payment of the registration fees.

Sponsor Name: _____

Address: _____
Street City State Zip

Phone: _____ Signature of responsible party: _____

OFFICE OF THE REGISTRAR (JA 106):
Action taken: ____ Full time student status: ____ Other: _____ ☐ Fall 20___ or/and ☐ Spring 20___

_____ _____
Registrar Signature Date

CASHIER'S OFFICE:
Fee payment has been arranged for the following semester(s): ☐ Fall 20___ or/and ☐ Spring 20___

_____ _____
Cashier Officer Signature Date

FINANCIAL AID OFFICE:
Fee payment has been arranged for the following semester(s): ☐ Fall 20___ or/and ☐ Spring 20___

_____ _____
Financial Aid Officer Signature Date