



## AUTHORIZATION FOR DEPARTMENT PAYMENT

*For International Scholars, Staff and Faculty Fees – To be completed by the UD Department*

### Scholar Information

<b>UD ID</b>	
<b>Name</b>	
<b>Visa Type</b>	
<b>Country of Origin</b>	
<b>Date of Birth</b>	
<b>Department</b>	

### One-Time Department Payment

I authorize the University of Delaware to deduct the amount indicated below for payment of International Fees.

- \$180.00 International Service Fee for J-1
- \$445.00 International Service Fee for H-1B

Department funding to be charged:

Purpose: \_\_\_\_\_

Purpose Code Administrator: \_\_\_\_\_

Account: 149821 \_\_\_\_\_

Please sign and date this form and return it to the Center for Global Programs & Services (CGPS).

To view the policy for the International Service Fee, please visit:  
<https://www.udel.edu/academics/global/iss/resources/life-us-ud/costs/>

If you have any questions regarding this form, please contact CGPS at 302-831-2115, or at [oiss-scholars@udel.edu](mailto:oiss-scholars@udel.edu).

Department Signature: \_\_\_\_\_

Date: \_\_\_\_\_