

Date: _____

Graduation Application
Credit/Debit Card Authorization Form

To Student:

- This form may be used when paying for the Graduation Application processing fee by credit or debit card
- Do not use this form if you are paying with a check or money order
- Non-refundable fees (subject to change): \$15.00 Graduation Application Processing Fee (per degree, certificate, or additional diploma)
- This form is to be accompanied by your graduation application

Student Information:

Name: _____ Student ID#: _____
(Last) (First) (M.I.)

Address: _____

Phone Number: (_____) _____ Email: _____@hawaii.edu

Cardholder Information:

Name: _____
(As Printed on Card)

Billing Address: _____

Card Issuer: Visa MasterCard

Credit/Debit Card Number (16-Digits): _____

Expiration Date: _____

Card CV2 Code (3-digit code on back of card): _____ Amount: \$ _____

I agree to pay the non-refundable fees that are indicated on the graduation application.

Cardholder Signature: _____ Date: _____

PLEASE MAIL OR FAX THIS FORM WITH GRADUATION APPLICATION TO:

UNIVERSITY OF HAWAII AT HILO
OFFICE OF THE REGISTRAR
200 W. KAWILI STREET
HILO, HAWAII 96720
FAX: (808) 933-0862