



Dual Credit/Dual Enrollment Payment Form

Payment in full is due at the time of registration.

(For office use only)

State Tech Student Number

Entered into CX By/Date Entered

Print Student Legal Name: _____
Last First Middle

Total Credit Hours: Dual Enrollment _____ Hours @ \$96 per Credit Hour = \$ _____ (Total Due)

Dual Credit _____ Hours @ \$88 per Credit Hour = \$ _____ (Total Due)

METHOD OF PAYMENT (Check One): *Payment in full is due at the time of registration.*

_____ Check-Payable to State Technical College of Missouri (attach to form)

_____ Money Order (attach to form)

_____ Credit Card (complete information below)

Check one: _____ MasterCard _____ Visa _____ Discover _____ American Express

Credit Card Number _____ - _____ - _____ - _____

Expiration Date _____ / _____ Security Code (on back of card) _____

Name on Credit Card (Print) _____ Telephone Number _____

Signature _____
(Signature required for all credit card payments.)

I authorize State Technical College of Missouri to charge my credit card for the dual credit/dual enrollment charges listed above.

Questions?

Dual Credit/Dual Enrollment Program
State Technical College of Missouri
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Email: dualcredit@statetechmo.edu
Web: www.statetechmo.edu/dualcredit