



University of Pittsburgh Greensburg

Office of Admissions
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TUITION DEPOSIT FORM

STUDENT IDENTITY	Last Name		First Name		Middle Initial	Pitt PeopleSoft ID (found on letter of admission)		
	Date of Birth			Last 4 digits of Social Security Number		Phone Number (with area code)		
				XXX-XX-_____				
	Permanent Address				City		State	ZIP Code
	Complete address of any residence(s) you have had during the last 12 months.							
Foreign Address						Foreign Phone Number		

CITIZENSHIP/RESIDENCY	Citizenship: <input type="checkbox"/> US Citizen <input type="checkbox"/> US Immigrant/Permanent Resident Alien <input type="checkbox"/> Refugee <input type="checkbox"/> Non-immigrant			Pennsylvania Residency: Consider the one-year period counting back from the start of the term for which you are enrolling.		
	<u>Student:</u> <input type="checkbox"/> PA resident – full-year <input type="checkbox"/> PA resident – less than full-year <input type="checkbox"/> Not PA resident		<u>Mother/Guardian:</u> <input type="checkbox"/> PA resident – full-year <input type="checkbox"/> PA resident – less than full-year <input type="checkbox"/> Not PA resident <input type="checkbox"/> Does not apply		<u>Father/Guardian:</u> <input type="checkbox"/> PA resident – full-year <input type="checkbox"/> PA resident – less than full-year <input type="checkbox"/> Not PA resident <input type="checkbox"/> Does not apply	

ENROLL	Entry Term: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer	Year: _____	<input type="checkbox"/> Freshman <input type="checkbox"/> Transfer	Housing Plans: <input type="checkbox"/> On-campus <input type="checkbox"/> Off-campus <input type="checkbox"/> Commute
	By the time you begin your enrollment at Pitt-Greensburg, do you expect to have any of the following? <input type="checkbox"/> AP course credits <input type="checkbox"/> College credits earned			

PAY	\$100. ⁰⁰ Tuition Deposit <i>FULL-TIME students only</i>	
	<input type="checkbox"/> Check Enclosed Check Number: _____	
	<input type="checkbox"/> Charge \$100.00 to my credit card: <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa <input type="checkbox"/> Discover	
	Credit Card Number: _____ Expiration: _____	
<input type="checkbox"/> I am or my parent/guardian is a University of Pittsburgh employee with tuition benefits		
<input type="checkbox"/> I am or my parent/guardian is a UPMC employee with tuition reimbursement benefits		

The information given is true and correct. I understand that falsification of any data may result in dismissal from the University. I authorize any employer, educational institution, or agency to release such data as is required by the University to verify any of the above information. By signing below, I also authorize the University of Pittsburgh to request and, my high school and/or testing agencies to release, any academic information or college entrance test results needed to make my admissions file complete.

Signature of Applicant

Date

OFFICE USE ONLY

Tuition Deposit for term code: ____ - ____

Received by: _____ via: _____ Date: _____