



Authorization for 1098-T or Student Bill Release

Student's Identification

Name: _____
 First Middle Initial Last

Previous Name (if applicable): _____
 First Middle Initial Last

Valley Number (if known): _____ Birthdate: _____

Information Requested

1098-T
List all years needed: _____, _____, _____, _____, _____

Tuition Bill
List all semesters needed: _____, _____, _____, _____, _____

Delivery Method

Email to: _____

Mail to: _____

Student's Authorization

I verify that I am the individual listed above. I authorize Kalamazoo Valley Community College to release my 1098-T or tuition bill to the specified delivery destination:

Signature: _____

Date: _____