



**International Student Services**  
Sierra Vista, 3<sup>rd</sup> Fl  
1500 N Verdugo Rd  
Glendale, CA 91208-2894  
818-240-1000 x6645  
[gcciso@glendale.edu](mailto:gcciso@glendale.edu)

## Credit Card Authorization Form

Please complete this form to submit your \$60.00 non-refundable application fee. By signing below, the cardholder is authorizing the charge for the named applicant's application fee. Please ensure funds are available for at least 60 days after submitting this form.

### Applicant Information

Applicant Student ID (sent via email after application submission): \_\_\_\_\_

Applicant Last/Family Name: \_\_\_\_\_

Applicant First Name: \_\_\_\_\_

Term of Application:  Fall  Spring  Summer Year: \_\_\_\_\_

### Cardholder's Information

Credit Card Type:  Visa  MasterCard  Discover

Credit Card Number: \_\_\_\_\_

Expiration Date (on back of card): \_\_\_\_/\_\_\_\_ 3-Digit Security Code (on back of card): \_\_\_\_\_

Card Billing Address: \_\_\_\_\_  
Street Number & Name, Apt./Unit # (if any)

\_\_\_\_\_  
City Province (if any) Country Postal Code

Name on Credit Card (if different than applicant): \_\_\_\_\_

Cardholder's Authorization: \_\_\_\_\_  
Signature Date