

## ISMET/OIA Monthly Tuition Transfer Authorization Form

Muslim Educational Trust Phone: (503) 579-6621

Fax: (503) 590-0201

☐ If there is no change in your banking information from last year, please check this box, skip this section, and fill out and sign the rest of the form; thank you!

I hereby authorize the Muslim Educational Trust (MET) to perform the following transfer:

FROM: (Please include a signed voided ch	eck with amoun	t of transfer shown)
Bank Account of:		(name of account holder)
Name of Bank/Financial Institution	1:	
Debit Deposit Account #:		Routing #:
Type of Account (please check one	): Checking	Savings
TO: Muslim Educational Trust (MET) Bank Name of Bank/Retail Center: <u>US E</u> Credit Deposit Account #: <u>153-603</u>	BANK 1810 SW 5t	
STUDENT NAME(S):		
STUDENT GRADE(S):		
TUITION TRANSFER Request:		
Monthly Tuition*:	\$	(see tuition scale below)
Curriculum & Facility Use Fees:	\$	(\$400/student/year; can be broken down in 10 installments)
Testing Fees**:	\$	(see testing fees below)
After-School Child Care:	\$	(check handbook for monthly rates)
TOTAL to pay per month:	\$	
**Annual Standardized Testing Fees: \$60		
Total Amount to be Transferred MONTHL	Y: \$	STARTING MONTH:
TIMING OF TRANSFER: Please MARK WH Please note that Tuition (thru June) is DUI	-	-
AUTHORIZATION SIGNATURE:		
Name:	(please	e print)
Signature:		Today's date: