The Career Center at Emory University (404) 727-6211

FEE REQUEST FORM – HEALTH PROFESSIONS/PRE-PROFESSIONAL

NO REQUEST WILL BE PROCESSED UNTIL PAYMENT IS DUE

A FLAT FEE OF $50.00 IS ASSESSED PER PROGRAM (MD, DO, DENTAL, etc.,)

Student Name (please print)  Emory Student ID# (7 digit)  Telephone #

Please fill out and submit this form with the appropriate fee to the Career Center:

- **CREDIT CARD** — Credit Card payments can be made at The Career Center — in person or by calling (404) 727-6211
- **CHECK** — Payment can be made at the Career Center by check, in person, or by regular mail (payable to Emory University).
- **CASH** — Pre-professional - 41500/0000001122 (Smart Key # 0000025022). Cash payments can be taken directly to the CASHIER in the BJones Center. The Career Center personnel cannot accept cash payments. Please be sure to take this form at the time of payment to the Cashier. Once the Cashier has processed your payment, please bring this form to the Career Center as proof of payment.

Please check the appropriate section(s) below:

( ) Medical Schools (allopathic programs) or Post-bac programs $50.00

( ) DO Schools (osteopathic programs) $50.00

( ) Dental Schools $50.00

( ) Other Health Professions Programs (specify) $50.00

Method of Payment:

- Credit Card: CCType: Visa  MC  AMEX  Discover
- Check (in person or by mail) _______________ (check number)
- Cash (Cashier will stamp this form)

*I understand that my credentials file cannot be sent out until it is complete. “Complete” means that The Career Center has received my letters of evaluation (recommendations) from each of the evaluators for which I am making a request, as well as my online submittal of my completed Registration & Policy & Procedures Form. ***Please note*** a specific formal request must be made via the Pre-Health Database.

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Student Signature  Date

Revised 10*06*2016 (MDE)