DSP+

REGISTERED APPRENTICESHIP PROGRAM

Letterhead Information as needed – use your own template as desired.

This letter can be emailed to wsu3rdparty@wichita.edu

DATE

Wichita State University Accounts Receivable
3rd Party Billing
1845 Fairmount, Campus Box 38
Wichita, KS 67260

To Whom it May Concern:

Your organization: Address
Address

Contact Person: Your contact person
PH: 111-111-1111
FAX: 111-111-1111
Email

Organization name is paying the UG Admission Badge Application Fee and the Tuition for the Badges for the Direct Support + program for the following students

| **First** | **Last** | WSU ID # | Semester |
|---|---|---|---|
| Name | Name | **ID HERE** | Semester Here |
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