



University of Maine and University of Maine at Machias
Office of Student Financial Services
3rd Party Billing: Student Consent and Acknowledgement Form

Student Information			
First and Last Name		MaineStreet ID #	
Email Address (@maine.edu)			

3rd Party Billing Organization/Agency Information	
3rd Party Org./Agency Name	
3rd Party Advisor/Contact Name*	
3rd Party Advisor/Contact Email*	

** Please note - This form grants the release of student information only to the name and email address listed above. If there is a change of contact information for the 3rd party organization/agency listed above, the student will be required to complete a new Consent and Acknowledgement Form.*

I acknowledge that I understand the terms required to participate in 3rd Party billing at UMaine:

- UMaine can only invoice 3rd party organizations/agencies after receiving signed 3rd party student consent to release information documentation for the specified 3rd party organization/agency.
- Charges assessed to the student’s account, that are not invoiced to the 3rd party, are due as billed. A balance on a student's account may result in a pre-registration hold and/or the student may be assessed a late fee.
- Students are responsible for monitoring the 3rd party and student account; and ensuring that the 3rd party pays timely.
- 3rd party payment is expected before the end of the semester for which the covered charges are applied to the student’s account.

The Family Education Rights and Privacy Act (FERPA) affords certain rights to students concerning the privacy of, and access to, their education records. I hereby authorize the University of Maine to release my financial aid and billing records to the above named 3rd party organization/agency for the purpose of invoicing. Typical information shared with these organizations includes, but is not limited to: student name, MaineStreet ID, itemized student charges/payments/credits, anticipated financial aid, current account balance, and term course information.

Please print your full name, sign, and date below to agree to the information above.

(Only handwritten signatures will be accepted)

Print Name		Date	
Signature	<i>(Electronic signatures not accepted)</i>		

Completed forms can be emailed to umbursar3rdpartybilling@maine.edu

or mailed to 5781 Wingate Hall, Orono, ME, 04469

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