



Annual Direct Billed Enrollment Form (2025-26)

FORM DUE BY 9/2/25

Once you enroll to be direct billed, you agree the school district shall paying for all students enrolled in Syracuse University courses through SUPA unless indicated otherwise, e.g. if you are paying for specific students or courses only. If you are only PARTIALLY paying, please contact Ashley Dening (supabilling@syr.edu) before submitting this form.

Rules and Procedures:

- Invoicing will occur and be final immediately following the Drop Deadline on November 14, 2025. Payment must be received within 60 days.
- Invoices will be mailed and emailed, so please make sure the email and mailing address provided are correct and accurate for billing. If alternative arrangements are needed, please coordinate directly with our business office.
- Please include a copy of your school's W-9 along with this form, in case there are any refunds.

High School Name:

High School Billing Address:

Billing Contact Information:

The person responsible for the invoicing process and who can provide any necessary payment information upon request.

Name: _____

Phone Number: _____

Email: _____

Title: _____

School Contact Information:

The person responsible for the making this executive decision within the high school, and who handles registration questions/concerns.

Name: _____

Phone Number: _____

Email: _____

Title: _____

Are you paying the full balance, or a partial balance? (Please check one): Full ☐ Partial ☐

If partial, please state the dollar amount per student that you are paying: \$ _____

Are your payments processed through NYC DOE (Please check one): ☐ Yes Borough: _____ ☐ No

If yes, please share the DOE Contact Information AND if invoice should be directly sent to the DOE:

Name: _____

Phone Number: _____

Email: _____

By signing this form I certify that all information provided is correct to the best of my knowledge and our school district will adhere to all Syracuse University Project Advance terms for Direct Billing.

Signature: _____

Please contact us at supabilling@syr.edu immediately if any changes need to be made to this arrangement after submittal of the form. Any changes will need to be approved by Syracuse University.

SUBMIT TO: supabilling@syr.edu