

ARKANSAS STATE UNIVERSITY-JONESBORO



\$15.00 Undergraduate Application Fee Slip
(Attach this slip to your payment)

FOAPAL# 110000 / 414301 / 512902 / 0000

Applicant's Name _____

Social Security Number _____ Date of Birth _____

Term Planning to Enroll: Spring/January _____ Summer/June _____ Fall/August _____

Payment made by _____

This slip must accompany the Application fee. Payment may be paid by check or money order made payable to *ASU Admissions* and mailed directly to:

**ASU Cashier
PO Box 2640
State University, AR 72467**

The application fee may also be paid by debit or credit card by calling the ASU Cashier at 870-972-3847. Please retain your receipt number for reference.

All application documents, **except the fee**, must be mailed directly to the ASU Admissions Office at:

**ASU Admissions Office
PO Box 1630
State University, AR 72467**

Applicant's Signature _____ Date _____