NORTHEAST
WI Technical College

Student Organization Check Request Form
Return form by email Finance@NWTC.edu

Student Organization Name _____

Number SC_____

☐ Send Attached Documents with check

☐ COMPANY:_____

ADDRESS:_____

CITY/STATE/ZIP_____

☐ **STUDENT** _____**(**Student ID #)

☐ **OTHER** _____(Full Social Security #)

NAME:_____

ADDRESS:_____

CITY/STATE/ZIP_____

**Forms need to be submitted in to Finance by noon on Tuesdays to ensure the check is cut in the weekly rotation. ALL checks will be mailed on Friday.

DESCRIPTION	AMOUNT	ACCOUNT CODE - Club #
		5501-710-93420-SC
TOTAL		

APPROVED BY:_____ _____
Officer   Date

_____ _____
Advisor   Date

Both Signatures Required
If this is for staff you will need to use Concur for reimbursement on paycheck. Please include the filled out form and documentation as backup.