



Medical Training Institute of New York

"COLLEGE OF HEALTHCARE PROFESSIONALS"

85 Willis Avenue, Mineola, NY, 11501

RECEIPT FORM FOR STUDENTS COVERING TUITION AND FEES

The receipt form for students is a receipt given to students to acknowledge payment of any fees to the institution.

SCHOOL NAME SCHOOL LOCATION Receipt Form

Receipt #	No. 0000000
Received From	
Address	
Program	
How Paid	
Amount of Account	
Amount Paid	
Balance Due	
Received By	
Received for tuition books registration fee other (specify below)	