University of Maryland University College

1098T Request Form

Date _____

Student ID _____

Last Name, First Name, Middle Initial _____

Address

Street (plus apt./ste./etc.) _____

City, State, Zip Code _____

Mailing Address

Street (plus apt./ste./etc.) _____

City, State, Zip Code _____

E-mail Address _____

Calendar Year requested _____

Your 1098T will be mailed to the address above. Please be advised that the completion of this request may take 3-5 business days to complete.