

DEFERMENT AGREEMENT

I _____ am requesting that my fees be set up on the University's payment plan. I understand that I must pay 1/2 of the fees + deferment service fee + any prior term charges at this time. I agree to pay the remaining 1/2 of the fees by the due date specified on the deferment calculation form. If my payment is not in the Business Office by 5:00PM on the due date, I understand that I will be charged an additional late fee. I also understand that if I do not pay the remainder of my fees by 5:00PM on the due date, my account will be placed in a delinquent status and I will be responsible for all costs incurred by the University in collecting such overdue amount, including but not limited to attorney's fees and collection agency fees.

Signature

Date

ID Number