



EMPLOYER ASSISTED GRADUATE TUITION DEFERRED PAYMENT PLAN
APPLICATION AND PROMISSORY NOTE

Office of Student and Accounts Receivable
1900 West Olney Avenue
Philadelphia PA 19141-1199
215-951-1055

La Salle University has established a deferred payment plan for graduate students who qualify for tuition reimbursement from their employer. Students accepted into the plan may defer payment of the portion of their tuition reimbursable under their employers' program until 45 days after the end of the semester. Any balance not covered under an employer education assistance plan must be remitted by the original due date.

Students qualified for tuition assistance that is not contingent upon completion of the course or achieving a certain grade, should not sign up for this plan. These students should refer to www.lasalle.edu/admin/businessaffairs/bursar/faq.htm and follow the "Third Party" instructions.

It is important to remember that you are personally obligated for any and all financial obligations made to the University, regardless of employment status or the length of time it will take your employer to process your reimbursement.

A) INSTRUCTIONS

- 1. Enter the student and employer information requested below.
2. Along with the application, you must provide a letter from your employer's human resources department confirming current employment, a copy of your employer's education assistance plan and a check or money order to pay the \$50 application fee. To be eligible for this program you must submit all of these materials by the original due date. Any balance not covered under your employer's education assistance plan must be remitted by the original due date. Applications for this plan will not be accepted after the fourth week of class. All students are subject to a 1% monthly late fee for unresolved balances carried beyond the first day of the semester.
3. Sign in ink, where indicated at the bottom of section "B" and section "C". Enter the dollar amount you wish to defer in the BOX in section "B".
4. When paying in person: Submit this form to the Office of Student and Accounts Receivable, along with the \$50.00 application fee and proof of employment.

When paying by mail: Complete and return this form along with your \$50.00 application fee and proof of employment.

STUDENT INFORMATION

Form with fields for TERM (CHECK ONE) -> [] FALL [] SPRING [] SUMMER, ACADEMIC YEAR: _____, STUDENT ID #:, STUDENT NAME:, EMAIL:, HOME ADDRESS:, PHONE: HOME: () WORK: (), DATE OF BIRTH:

EMPLOYER INFORMATION

Form with fields for EMPLOYER NAME:, EMPLOYER ADDRESS:, HUMAN RESOURCES CONTACT:, HUMAN RESOURCES PHONE:

B) NOTE

FOR VALUE RECEIVED, the undersigned ("Student") does hereby promise to pay to the order of LA SALLE UNIVERSITY ("the University") the principal sum of \$ [redacted] Dollars. Student further understands and agrees that, the sum of fifty dollars (**\$50.00**) for the **Application Fee** shall be remitted together with the application.

The entire unpaid principal sum of this Note and all other sums owing hereunder shall at the option of the University become immediately due and payable (i) if the status of Student as an enrolled student of the University shall, at any time at which there exists any indebtedness to University under this Note, terminate or to be terminated or suspended for any reason.

The University shall have the right to withhold academic records of Student, included but not limited to transcripts and diplomas, and may in its sole discretion refuse to accept registration for further semesters, during any period of delinquency or default hereunder.

No waiver of any default hereunder shall be construed as a waiver of any subsequent default, and the failure to exercise any right hereunder shall not waive the right to exercise such right thereafter.

Student hereby waives presentment for payment or acceptance, demand, protest, notice of protest, and notice of dishonor of payment or acceptance. In the event of any default hereunder, University shall have the right to employ a collection agency and/or any other legal means to collect sums due hereunder. Student shall pay all cost of collection of this Note, including attorney's fees.

If any provision of this Note shall for any reason be held to be invalid or unenforceable, such invalidity or unenforceability shall not effect any other provision hereof, but this Note shall be construed as if such invalid or unenforceable provision had never been contained hereunder.

The Application and Disclosure Statement set forth on the reverse hereof is incorporated herein by reference, and Student acknowledges that he has received and read the same.

IN WITNESS WHEREOF and intending to be legally bound hereby, the undersigned has hereunto set his or her hand on the day and year first above written.

Student's Signature	Date
X _____	_____

C) APPLICATION AND DISCLOSURE STATEMENT

1. Qualified students: All enrolled graduate students of LA SALLE UNIVERSITY, whose employers maintain an education assistance plan and who are eligible for said plan are eligible.
2. Along with the application, the student must provide a letter from their employer's human resources department confirming current employment and a copy of the employer's education assistance plan.
3. Amount that may be Deferred: The MAXIMUM amount is 100% of the net amount reflected on the educational expense invoice for the semester after the application of all financial aid awards that are covered by the employers' education assistance plan. Only charges included in the official invoice, excluding prior balances, are eligible for deferment under this plan.
4. Semesters during which the plan is available: The plan will be available during the fall, spring, and summer.
5. Number and time of installments: The amount deferred under the plan will be payable in one payment, no later than the 45th day following the last day of the given term.
6. Charges and fees: Each applicant for the plan must pay a \$50.00 application fee; which must be remitted together with the student's application. Each payment delinquent for more than five (5) days will be assessed a LATE FEE of two hundred fifty dollars (\$250.00).
7. Summary of Billing Rights: If you believe that your bill is incorrect, or if you need more information about a transaction on your bill, write to the University at the address shown on your bill as soon as possible. We must hear from you no later than 60 days after we have sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, you must provide the following information: Your name and student identification number, along with the dollar amount of the suspected error. Describe the error, and explain why you believe there is an error. You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.
8. Possibility of Taxable Income: Students should be aware that the tuition reimbursement may in fact be taxable income to the student. The fact that the student is using it to repay deferred tuition does not change the character of the income to the student and the amount reimbursed may be less than the amount due if the employer withholds against the payment of the student. In such instances, student is liable for the total amount due.
9. Assignment: the student needs to know that he or she is not assigning a claim or right to reimbursement to La Salle University; in other words, La Salle University is not going to pursue any employer to obtain the reimbursement; and, if the employer does not reimburse the student, the student will remain obligated to the University.

Student's Signature	Date
X _____	_____



EMPLOYER ASSISTED GRADUATE TUITION DEFERRED PAYMENT PLAN
STATEMENT OF FINANCIAL RESPONSIBILITY

Office of Student and Accounts Receivable
1900 West Olney Avenue
Philadelphia PA 19141-1199
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By signing below, I acknowledge the following terms and conditions regarding the Employer Assisted Graduate Tuition Deferred Payment Plan. These terms and conditions are either in addition to, or a restatement of those as described in the promissory note.

- Payment in full for the amount deferred is due to La Salle University no later than forty five (45) days from the official last day of classes for the semester as stated in the University Academic Calendar: (www.lasalle.edu/admin/academ.htm).
- If payment is not received by this date, I will be charged a **late fee** in the amount of **two hundred fifty dollars (\$250)**.
- La Salle University cannot accept responsibility, nor extend deadlines, for late payments resulting from delays on my employer's behalf. If delays should occur, I must make payment in full and await my employer's reimbursement.
- La Salle University will not correspond with my employer. Furthermore, it is my responsibility to obtain reimbursement from my employer and make payment to the university directly.

TERM: (CHECK ONE) <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER	YEAR: _____
NAME (please print):	STUDENT ID #:
SIGNATURE: X _____	DATE: _____

Please mail all correspondence and payments to the following address:

La Salle University
Office of Student and Accounts Receivable
1900 West Olney Avenue
Philadelphia PA 19141

Please do not use the yellow return envelope included with your invoice.
These envelopes go directly to our bank, not the University.