

STUDENT FINANCIAL RESPONSIBILITY AGREEMENT

Payment in full for tuition & fees, enrollment in a payment plan, or third party authorization form must be completed within 48 hours of registration. By registering the student agrees to be financially accountable for all fees, fines, bookstore charges and any schedule changes that result in a balance due.

PAYMENT OF FEES/PROMISE TO PAY

I understand that when I register for any class at Glen Oaks Community College (GOCC) or receive any service from GOCC I accept full responsibility to pay all tuition, fees and other associated costs assessed as a result of my registration and/or receipt of services, and I promise to pay for all assessed tuition, fees and other associated costs by the published or assigned due date.

I understand that administrative, clerical or technical billing errors do not absolve me of my financial responsibility to pay the correct amount of tuition, fees and other associated financial obligations assessed as a result of my registration at GOCC.

I understand and agree that if I drop or withdraw from some or all of the classes for which I register after the refund deadline, I will be responsible for paying all or a portion of tuition and fees in accordance with the tuition refund schedule. I have read the terms and conditions of the tuition refund schedule and understand those terms are incorporated herein by reference. I further understand that my failure to attend class or receive a bill does not absolve me of my financial responsibility as described above.

FINANCIAL AID

I understand that aid described as "estimated" on my Financial Aid Award does not represent actual or guaranteed payment, but is an estimate of the aid I may receive if I meet all requirements stipulated by that aid program.

I understand that my Financial Aid Award is contingent upon my continued enrollment and attendance in each class upon which my financial aid eligibility was calculated. If I drop any class before completion, I understand that my financial aid eligibility may decrease and some or all of the financial aid awarded to me may be revoked. I understand that the financial aid cannot be awarded for classes that do not count toward my degree and/or certificate requirements.

If some or all of my financial aid is revoked because I dropped or failed to attend class, I agree to repay all revoked aid that was disbursed to my student account and resulted in a credit balance that was refunded to me.

I agree to allow any financial aid I receive to be used to pay any and all charges assessed to my student account at GOCC such as tuition, fees, fines, bookstore charges, or any other amount, in accordance with the terms of the aid.

DELINQUENT ACCOUNT/COLLECTION

Business Office Hold: I understand and agree that if I fail to pay my student account balance or any monies due to GOCC by the scheduled due date, GOCC will place a Business Office hold on my student account, preventing me from registering for future classes, obtaining an official transcript, or receiving a diploma.

Collection: I understand and accept that if I fail to pay my student account balance or any monies due to GOCC by the scheduled due date, GOCC may refer my delinquent account to a collection agency. I further understand that I am responsible for paying the collection agency fee with all costs and expenses, including attorney fees, necessary for the collection of my delinquent student account. Finally, I understand that my delinquent student account may be reported to one or more of the national credit bureaus.

Consent: I authorize GOCC and its agents and contractors to contact me at my current and any future phone number(s), email address(es) or wireless device(s) regarding my delinquent student account(s)/loan(s) or any other debt I owe to GOCC. I authorize GOCC and its agents and contractors to use automated telephone dialing equipment, artificial or pre-recorded voice or text messages, and personal calls and emails in their efforts to contact me. Furthermore, I understand that I may withdraw my consent to call my phone numbers(s), cellular or landline, by submitting my request in writing to the applicable contractor or agent contacting me on behalf of GOCC. I understand and agree that I am responsible for keeping GOCC records

up to date with my current physical addresses, email addresses, and phone numbers.

ENTIRE AGREEMENT

This agreement supersedes all prior understandings, representations, negotiations and correspondence between the student and GOCC, constitutes the entire agreement between the parties with respect to the matters described, and shall not be modified or affected by any course of dealing or course of performance. This agreement may be modified by GOCC if the modification is signed by me. Any modification is specifically limited to those policies and/or terms addressed in the modification.

I have read, understand, and agree to pay the college pursuant to this Financial Responsibility Agreement:

Student's Signature

Date