

**THIEL COLLEGE
FALL 2019 FINANCIAL ARRANGEMENT FORM**

Student Name: _____

Student ID Number: _____

Payment Due (From Billing Statement Enclosed) \$ _____

Payment Options:		
Deduct amounts below if applicable. It is your responsibility to ensure all processing requirements are completed.		
	Federal PLUS Loan (Lender will deduct origination fee of 4.248%)	\$ _____
	Alternative Loan Lender	\$ _____
	Outside Scholarships/Other	\$ _____
Payment Due Less Loans Applied for and/or Outside Funds Received		\$ _____

Payment in Full	Due: August 1, 2019	(a) Payment Due \$ _____
Five Pay Plan: Requires registration fee of \$25.00		
Payment due(a) + \$25.00 registration fee = (b) \$ _____		
\$ _____ (b) / 5 Payments = \$ _____ monthly		
Due: August 1, 2019 Due: September 1, 2019 Due: October 1, 2019 Due: November 1, 2019 Due: December 1, 2019		

Payment will be submitted monthly by:

_____ Check _____ Credit Card (See Section 1 below) _____ Direct Debit (Complete Section 2 below)

Section 1: When making payment by credit card please note that a convenience fee of 2.5% will be added to each transaction.

Account number: _____ **Exp. Date:** _____ **3 Digit Security Code:** _____

Address of Cardholder: _____ **Zipcode:** _____ **Signature:** _____

Section 2: Making payment by direct debit:

I authorize Thiel College to initiate debit entries to my () Checking () Savings account indicated below at the depository financial institution named below.

Depository Bank Name _____

Branch _____ City _____ State _____ Zip _____

Routing Number _____

Account Number _____

**** A voided check must be attached to this form.**

This authorization will remain in effect until Thiel College has received written notification no later than 15 days before the next effective transaction date.

Financial Responsibility Clause:

I understand that I am responsible for all tuition and fees for this academic term. I also understand that I am responsible for any additional fees that are added during this semester including but not limited to parking fines, dorm damages, or other college related charges. I understand that failure to pay by the appropriate due date may result in Thiel College commencing collection activities and I am responsible for all expenses incurred, within the law, to recover the debt. This note shall, in all aspects, be governed by the law of the Commonwealth of Pennsylvania.

Student Signature

Parent or Guardian Signature

Date