



# EASTERN CONNECTICUT STATE UNIVERSITY

83 WINDHAM STREET • WILLIMANTIC, CONNECTICUT 06226 • 860-465-5000

## Student Enrollment Agreement

### BILLING & PAYMENT OF FEES

I understand that when I register for any class at **Eastern Connecticut State University** or receive any service from **Eastern Connecticut State University** I accept full responsibility to pay all tuition, fees, and other associated costs, which may include, but is not limited to, housing, meals, fines, or incidental charges assessed as a result of my course/housing registration and/or receipt of services.

I understand that **Eastern Connecticut State University** uses electronic billing (e-bill) as its official billing method, and therefore I am responsible for viewing and paying my student account e-bill by the scheduled due date. I further understand that failure to review my e-bill does not constitute a valid reason for not paying my bill on time. E-bill information is available at <http://www.easternct.edu/fiscalaffairs/files/2016/06/BursarBillingInfoFall2016.pdf> .

### WITHDRAWAL

I understand and agree that if I drop or withdraw from some or all of the classes for which I register, I will be responsible for paying all or a portion of tuition and fees in accordance with the published tuition refund schedule at <http://www.easternct.edu/fiscalaffairs/bursar/>. I have read the terms and conditions of the published tuition refund schedule at <http://www.easternct.edu/fiscalaffairs/bursar/refund-policy/> 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. If I decide to completely withdraw from **Eastern Connecticut State University**, I will follow the instructions at <http://www.easternct.edu/advising/faculty-services/general-advising-information/academic-standing/withdrawal-or-leave-of-absence-from-university/> which I understand and agree are incorporated herein by reference.

### DELINQUENT ACCOUNTS

**Financial Hold:** I understand and agree that if I fail to pay my student account bill or any monies due and owing **Eastern Connecticut State University** by the scheduled due date, **Eastern Connecticut State University** may place a financial hold on my student account, preventing me from future course registration and/or receipt of other University services, transcripts of grades or other official papers.

**Late Payment Charge:** I understand and agree that if I fail to pay my student account bill or any monies due and owing **Eastern Connecticut State University** by the scheduled due date, **Eastern Connecticut State University** may assess a late payment charge in the amount of \$50.

**Drop for Non-Payment:** I understand and agree that if I fail to pay my student account bill or any monies due and owing **Eastern Connecticut State University** by the scheduled due date, my class schedule, and if applicable, my housing assignment may be cancelled. I understand that if I wish to have my class schedule reinstated, I may be required to pay a \$100 re-registration fee, as well as my account balance in full.

**Collection Agency Fees:** I understand and accept that if I fail to pay my student account bill or any monies due and owing **Eastern Connecticut State University** by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, **Eastern Connecticut State University** may refer my delinquent account to a collection agency and the university may no longer accept direct payments. I further understand that I am responsible for paying the collection agency fee which may be based on a percentage at a maximum of fifteen percent (15%) of my delinquent account balance, together with all costs and expenses, including reasonable attorney's fees, necessary for the collection of my delinquent account. Finally, I understand that my delinquent account may be reported to one or more of the national credit bureaus.

**Returned Payments:** If a payment made to my student account is returned by the bank for any reason, I agree to repay the original amount of the payment plus a returned payment fee of \$20. I understand that multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I sign with **Eastern Connecticut State University** may result in cancellation of my classes, suspension of my eligibility to register for future classes, and loss of ability to pay by check/eCheck at **Eastern Connecticut State University**.

## COMMUNICATION

**Method of Communication:** I understand and agree that **Eastern Connecticut State University** uses my university e-mail account as an official method of communication with me, and that therefore I am responsible for reading the e-mails I receive from **Eastern Connecticut State University** on a timely basis.

**Contact:** I authorize **Eastern Connecticut State University** and its agents and contractors to contact me at my current and any future cellular phone number(s), email address (es) or wireless device(s) regarding my delinquent student account(s)/loan(s), any other debt I owe to **Eastern Connecticut State University**, or to receive general information from **Eastern Connecticut State University**. I authorize **Eastern Connecticut State University** 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 cellular phone by submitting my request in writing to the Registrar's Office or in writing to the applicable contractor or agent contacting me on behalf of **Eastern Connecticut State University**.

**Updating Contact Information:** I understand and agree that I am responsible for keeping **Eastern Connecticut State University** records up to date with my current physical addresses, email addresses, and phone numbers by following the procedure at <http://www.easternct.edu/registrar/forms/change-of-information-policy/> . The linked procedure is incorporated herein by reference. Upon leaving **Eastern Connecticut State University** for any reason, it is my responsibility to provide **Eastern Connecticut State University** with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to **Eastern Connecticut State University**.

## 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.

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 account and resulted in a credit balance that was refunded to me.

**Federal Aid:** I understand that any federal Title IV financial aid that I receive, except for Federal Work Study wages, will first be applied to any outstanding balance on my account for tuition, fees, room and board. Title IV financial aid includes aid from the Pell Grant, Supplemental Educational Opportunity Grant (SEOG), Direct Loan, PLUS Loan, Perkins Loan, and TEACH Grant programs.

**Awards, Scholarships, Grants:** I understand that all awards, scholarships, and grants awarded to me by **Eastern Connecticut State University** will be credited to my student account and applied toward any outstanding balance. I further understand that my receipt of an award, scholarship, or grant is considered a financial resource according to federal Title IV financial aid regulations, and may therefore reduce my eligibility for other federal and/or state financial aid (i.e., loans, grants, Federal Work Study) which, if already disbursed to my student account, must be reversed and returned to the aid source.

## IRS FORM 1098-T

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to **Eastern Connecticut State University** upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to provide my SSN or TIN to **Eastern Connecticut State University**, I agree to pay any and all IRS fines assessed as a result of my missing SSN/TIN.

## PRIVACY RIGHTS & RESPONSIBILITIES

I understand that **Eastern Connecticut State University** is bound by the Family Educational Rights and Privacy Act (FERPA) which, in many instances, prohibits **Eastern Connecticut State University** from releasing any information from my education record without my written permission. Therefore, I understand that if I want **Eastern Connecticut State University** to share information from my education record with someone else, I must provide written permission by following the procedure outlined at <http://www.easternct.edu/registrar/forms/ferpa/>. I further understand that I may revoke my permission at any time as instructed in the same procedure.

## STUDENT AGE

I understand and agree that if I am younger than the applicable age of majority when I execute this agreement that the educational services provided by **Eastern Connecticut State University** are a necessity, and I am contractually obligated pursuant to the “doctrine of necessities.”

## BILLING ERRORS

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 **Eastern Connecticut State University**.

## ENTIRE AGREEMENT

This agreement supersedes all prior understandings, representations, negotiations and correspondence between the student and **Eastern Connecticut State University**, 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 **Eastern Connecticut State University** if the modification is signed by me. Any modification is specifically limited to those policies and/or terms addressed in the modification.

To view/print a copy of this agreement please visit:

<http://www.easternct.edu/fiscalaffairs/bursar/>