Le Moyne College Employer Tuition Deferral Program Application

Student N					<u> </u>	
\ddress_	Lasi	Fırsı	Initia)		Soc See #	
	Street	City	State	Zip	Phone	
mployer	r					
Address_						
	Street	Слу	State	Zıp	Phone	
	s registering for the following cours					
	urse Name	Course No.	Credit Hours		Tuttion	
2						
3	110 - 140					
1	You will give your employer this Employer Tutton Deferral Program Application on which your employer must verify your eligibility for futtion reimbursement and clarify payment procedures.					
2	After the completed application is returned by your employer, you must complete the Promissory Note for Employer Tuition. Reimbursement					
3	Your tustion is due no later than 45 days after the final day of the semester. You will receive monthly statements					
4.	If, during the semester, there are payments made to your account from another source (e.g. student loan) these payments will first be applied to your unpaid tuition. These funds will not be refunded until your ruition has been paid in full					
5.	You will be responsible for any charges your employer does not pay. Failure to make full payment by the due date will result in a financial hold being placed on your account and you may be referred to an outside source for collection.					
6	Your signature below acknowle	dges that you have read and unde	erstand these guidelines.			
I have i	read the Guidelines for Employer T	uttion Deferral. I understand that	l am fully responsible f	or the payment of	my tuition by	
Student	signature			Dote		
Orderik						
non r	MAT ONED THE ONLY					
FOR E	MPLOYER USE ONLY					
The ubov	re student is authorized to register j	for the above listed courses throu	gh(name of company)		employee tuition reimbu	rsemei
orogram.			(name or cumpany,	1		
Volhorized	Signature	Tı	νc			
Department		Phone No				
c navnie	nt contingent upon satisfactory con	interion of courses? [1 Yes [1] N	0			
What is t	he percentage of rumbursement'	<u> </u>				
	authorized for aution per calendar y s's calendar year runs from/_					
	require proof of registration? [] Ye		Yes No			
	contact person for questions (if dif					
				Phone		
3illing A	ddress				Emiliade may now a	
_						
PROM	MISSORY NOTE FOR EMP	PLOYER TUITION REIM	BURSEMENT PLA	N.		
In come	ideration of having been given an e	extension of time by Le Movne C	ollege for payment of \$		_owed for terror of the above stu-	ılanı
(named	in the Student Information section	above) for thes	emester, which sum is t	n be paid to the o	nler of Le Moyne College at the Bi	rsar`s
Office !	in Syracuse, New York, by the em- ledges his/her obligation to make	ployer named above (in Employe	Use Only section), 45	days after the ser	mester ends, the undersigned	
	27 DR 85 D9				ection with this note. In case of deta	audt
	dersigned will pay collection costs (