



TUITION DEFERMENT APPLICATION-Graduate & Undergraduate

Section A: Completed by Student

Student Name \_\_\_\_\_ SSN # XXX-XX-\_\_\_\_\_
Employer Name \_\_\_\_\_ Student's Phone ( ) \_\_\_\_\_
Employer Address \_\_\_\_\_ Employer's Phone ( ) \_\_\_\_\_ Cohort
Name: \_\_\_\_\_

1) Tuition deferment is requested for the selected term:

School of Professional Studies
Term
\_\_\_\_\_ Spring 2020 (Accelerated Degree Programs, Graduate Programs or Certificate Programs)
\_\_\_\_\_ Summer 2020 (Graduate Programs only)
\_\_\_\_\_ Fall 2020 (Accelerated Degree Programs, Graduate Programs or Certificate Programs)
A Fee of \$75.00 per term is payable to Albright College for participation in the deferment program. Fee is due prior to the first day of classes in the term.

2) Indicate the course(s) for which reimbursement will be provided for specific term:

\_\_\_\_\_
\_\_\_\_\_

Statement of Financial Responsibility:

I promise to pay Albright College my total financial obligation (including tuition and fees). I understand and acknowledge that in the event any anticipated funds are denied or are otherwise not forthcoming, or in the event that I stop attending Albright College for any reason, my total financial obligation shall become due and payable immediately. I understand and acknowledge that failure to fully satisfy my total financial obligation may result in collection and/or legal action brought against me by Albright College. Further, I understand and acknowledge that I am fully obligated and responsible for any and all charges associated with such collection and/or legal action including, but not limited to, the reasonable attorney fees of Albright College. I irrevocably agree that any suit, action or proceeding arising hereunder or with respect hereto will be instituted in the Court of Common Pleas of Berks County, Pennsylvania, or the United States District Court for the Eastern District of Pennsylvania and irrevocably and unconditionally submits to the jurisdiction of each such Court for such purpose.

Payment of deferred charges is due no later than 30 days from the conclusion of the class.
Students will continue to receive monthly statements during the deferment period.
All tuition is the responsibility of the student.

**Signature indicates consent of financial responsibility as well as authorization for employer to submit information to Albright.**

Student Signature \_\_\_\_\_

Date: \_\_\_\_\_

*When Section A is complete, forward this sheet to Employer to complete Section B (reverse side)*

**Section B:** Completed by Employer –Current tuition rates are available at:

<https://www.albright.edu/school-professional-studies/financial-aid/tuition-and-fees/>

1. Is reimbursement given \_\_\_\_\_ before or \_\_\_\_\_ after grades are received?
2. Are Web-based grades acceptable? \_\_\_\_\_ Yes \_\_\_\_\_ No

Amount to be reimbursed: \$ \_\_\_\_\_ for \_\_\_\_\_ number of courses.

Expected date of payment: \_\_\_\_\_

Please accept this as verification that the student listed on the reverse side is eligible for the tuition reimbursement as shown.

Authorizing Official's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Phone (    ) \_\_\_\_\_

***When complete, forward this sheet to:***

***Student Accounts Office***

***Albright College***

***13<sup>th</sup> and Bern Streets***

***P.O Box 15234***

***Reading, PA 19612-5234***

***Fax: 610-929-6514/ Email: [Studentaccounts@albright.edu](mailto:Studentaccounts@albright.edu)***

***Deferment will not be valid unless signed by both student and employer***

***AND***

***The specified fee is received.***

***Thank You.***

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