

## Terms and Conditions

(Retain this portion for your records.)

### 1. Enrollment in the Employer Reimbursement Program:

The student must provide each item:

- A. Completed and signed Application and Participation Agreement.
- B. Pay the non-refundable application fee of \$10.00.
- C. A letter from your employer stating the terms of the company's tuition reimbursement policy and your participation in the company's program.

**2. Payment Terms:** 33% of the semester's total tuition and lab fees must be paid as billed by the University. Students who register after the due date must pay at the time of registration. Final payment is made within four weeks of the last day of final exams for the semester of enrollment. (See front panel for due dates.)

**3. Late payment Fee:** Late payments will be assessed a \$150.00 late fee.

**4. Changes:** Participant must furnish the Cashier a written notice of any change in the number of credit hours taken.

**5. Timely Payment:** The participant is required to remit full and timely payment to the University regardless of the employer's failure to comply, change of employment or other change of circumstances.

**6. Availability:** The Employer Reimbursement Program is available to part-time students.

**7. Participation:** Failure to comply with any of the Terms and Conditions will prevent the student's further participation in the Program.

**8. Semesters:** The Employer Reimbursement Program is available fall and spring semesters only. The summer sessions are not included in the program.

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## JCU Employer Reimbursement Application & Participation Agreement

These three sections **must** be completed by the student.

**Use only the appropriate semester worksheet.**

Name & Address

Name	<input type="text"/>	ID Number	<input type="text"/>		
Street	<input type="text"/>	Apt.	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>	Zip	<input type="text"/>
Telephone (Day)	<input type="text"/>	Telephone (Evening)	<input type="text"/>		

Semester Information

### Fall Semester

Tuition & Lab Fees	\$	<input type="text"/>
Multiply by 33% (x .33)	\$	<input type="text"/>
Amount Due on Published Date Or upon ERP Program Registration		<input type="text"/>
Amount Due Four Weeks from last day of final exams		<input type="text"/>

### Spring Semester

Tuition & Lab Fees	\$	<input type="text"/>
Multiply by 33% (x .33)	\$	<input type="text"/>
Amount Due on Published Date Or upon ERP Program Registration		<input type="text"/>
Amount Due Four Weeks from last day of final exams		<input type="text"/>

Signature

I have read and agree to the terms and conditions of the Employer Reimbursement Program and for the wish to enroll in the Program  Fall 20  or  Spring 20  Semester (Select one).

I understand that failure to comply with these terms will prohibit my further participation in this program

I am employed by  in

My work telephone number is:

Signature

Date

Bursar's Office Use Only	<input type="checkbox"/> Application Received	Date	<input type="text"/>
	<input type="checkbox"/> Employer Letter Received		
	<input type="checkbox"/> \$10.00 Application Fee Received		

