Student Financial Responsibility Agreement
High School Students

I understand that the Student Financial Responsibility Agreement is between the student, parent or guardian and Immaculata University. I understand that once I am registered, I am responsible for payment of tuition, fees and other charges associated with the registration. A billing statement will be mailed at time of registration and payment is due in full upon receipt of bill. If withdrawing, I am responsible for paying all or some portion of tuition and fees based on the date of withdrawal.

Course Add, Drop, Withdrawal Policy
I understand that if I make any adjustments to my enrollment, I will remain responsible for payment of tuition and fees for which I have added, dropped, withdrawn, regardless of grade, or failure to attend, according to the Policy.

I understand that requests to drop or withdraw from a course are to be made in writing to Immaculata University Registrar’s Office; send notification to mbrice@immaculata.edu. Notification should also be made to your school.

Tuition refunds will be based on the date of notification:
- Before classes start: 100% refund
- During the 1st week of classes: 80% refund
- During the 2nd week of classes: 60% refund
- During the 3rd week of classes: 40% refund
- During the 4th week of classes: 20% refund
- After the 4th week of classes: 0% refund

Late Fees
I understand that a past due student account balance will result in monthly late fees of $30 and a hold will be placed on my student account.

Financial Holds
I understand that a financial hold will prohibit me from future registrations, receiving grades and transcripts.

Debt Collection
I understand that if my student account becomes delinquent, it is at the discretion of IU to refer my account to a collection agency and that I agree to reimburse IU for fees of any collection agency, which may be based on a percentage of the debt up to a maximum of 40% of the debt, and all costs and expenses, including reasonable attorney’s fees, incurred by IU in such
collection efforts. I also understand that any delinquent debts may/will be reported to a credit bureau.

I understand that by signing this agreement, I consent to be contacted by IU and their respective agents and contractors using written, electronic, or verbal means as the law allows. This consent includes contacting me at any telephone number, home or mobile device, associated with my account, currently or in the future, using auto-dialer, text message, pre-recorded voice message, or personal calls regarding my obligation to repay my debts to IU. I understand that others may be able to access my messages and/or emails and their contents, which may include information about my debt and status.

I have read and agree to comply with the information regarding my Financial Responsibility to Immaculata University.

**High School Information**

Academic Year: __________________________ Fall  Spring  Both

School: ____________________________________________________________

**Student Information**

Student ID Number: __________________________________________ (for Immaculata use only)

Name: __________________________________________________________________________

Address: __________________________________________________________________________

Phone Number: (____) ______-________

Social Security Number: _______ - _______ Date of Birth: __________

Student Signature: __________________________ Date: ____________________

**Parent or Guardian Information**

Name: ________________________________ Relationship: __________________

Phone: (H) ________________ (W) ________________ (C) ________________

Social Security Number: __________ - __________

Signature: __________________________ Date: _____________________