Willamette University Student Financial Responsibility Agreement

Payment of Fees/Promise to Pay

I understand that when I register for any class at Willamette University (the University) or receive any service from the University I accept full responsibility to pay all tuition, fees and other associated costs assessed as a result of my registration and/or receipt of services. These charges may include but are not limited to tuition, room, meal plan, health insurance, student body fees, library charges, parking fines, health center charges, and other University charges during my enrollment at the University. I further understand and agree that my registration and acceptance of these terms constitutes a promissory note agreement (i.e., a financial obligation in the form of an educational loan as defined by the U.S. Bankruptcy Code at 11 U.S.C. §523(a)(8)) in which the University is providing me educational services, deferring some or all of my payment obligation for those services, and I promise to pay for all assessed tuition, fees and other associated costs by the published or assigned due date.

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 University’s Student Accounts Refund Policy published on the Student Accounts website at http://willamette.edu/dept/studentaccounts/information/withdrawals.html. I have read the terms and conditions of the published Student Accounts Refund Policy and tuition refund schedule 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.

Method of Billing

I understand that I will receive a bill once per month during the semester for all unpaid charges on my account. I understand that the University uses electronic billing (eBilling) through Bill+Payment as its official billing method, and therefore I am responsible for viewing and paying my student account eBill by the scheduled due date. I will receive an email notification to my University email address when my eBill is available for review. I further understand that failure to review my eBill does not constitute a valid reason for not paying my bill on time. I understand that tuition and other charges must be paid on the due dates published by the University prior to the first day of classes for fall and spring semesters. Information regarding Bill+Payment and eBilling is available on the Student Accounts website at https://willamette.edu/dept/studentaccounts/billing/index.html.

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 the University.

Returned Payments/Failed Payment Agreements

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 $35. I understand that multiple returned
payments and/or failure to comply with the terms of any payment plan or agreement I sign with the University may result in cancellation of my classes and/or suspension of my eligibility to register for future classes at the University.

**Delinquent Account/Collection**

**Financial Hold:** I understand and agree that if I fail to pay my student account bill or any monies due and owing the University by the scheduled due date, the University will place a financial hold on my student account, preventing me from registering for future classes, requesting transcripts, or receiving my diploma. I understand that the University reserves the right to disallow my enrollment if I fail to pay my student account bill.

**Late Payment Charge:** I understand and agree that if I fail to pay my student account bill or any monies due and owing the University by the scheduled due date, the University will assess a late payment fee of $50 and/or finance charge at the rate of 1% per month on the past due portion of my student account until my past due account is paid 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 the University by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, the University may refer my delinquent account to a collection agency. I further understand that I am responsible for paying the collection agency fee which may be based on a percentage of my delinquent account up to the maximum percentage allowable by law, 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.

**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.

I agree to allow financial aid I receive to pay any and all charges assessed to my account at the University such as tuition, fees, campus housing and meal plans, student health insurance, parking permits, service fees, fines, bookstore charges, or any other amount, in accordance with the terms of the aid.
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, and Perkins Loan programs.

Prizes, Awards, Scholarships, Grants: I understand that all prizes, awards, scholarships and grants awarded to me by the University will be credited to my student account and applied toward any outstanding balance. I further understand that my receipt of a prize, 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.

Withdrawal

If I decide to completely withdraw from the University, I will follow the University Leave of Absence or Withdrawal Policy at https://www.willamette.edu/cla/catalog/resources/policies/index.php, which I understand and agree is incorporated herein by reference.

Communication

Method of Communication: I understand and agree that the University uses my Willamette University email address as an official method of communication with me, and that therefore I am responsible for reading the emails I receive from the University on a timely basis.

Contact: I authorize the University and its agents and contractors to contact me at my current and 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 the University, or to receive general information from the University. Furthermore, I understand that I may withdraw my consent to call my cellular phone by submitting my request in writing to the Student Accounts Office or in writing to the applicable contractor or agent contacting me on behalf of Willamette University.

Updating Contact Information: I understand and agree that I am responsible for keeping the University records up to date with my current physical address, mailing address, email address, and phone number by completing the Change of Address form at http://www.willamette.edu/dept/registrar/forms/. I will submit a Change of Address form to the University Registrar as soon as possible following a change in my contact information. This procedure is incorporated herein by reference. Upon leaving the University for any reason, it is my responsibility to provide the University with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to the University.

IRS Form 1098-T

If I am an eligible student and make payments for qualified educational expenses during the year, the University will provide me with a Form 1098-T tuition statement by January 31. I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to the 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 the 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 the University is bound by the Family Educational Rights and Privacy Act (FERPA) which prohibits the University from releasing any information from my education record without my written permission, including student financial information. Therefore, I understand that if I want the University to share information from my student account with someone else, I must provide written permission by completing the Authorization to Release Financial Information at http://willamette.edu/dept/studentaccounts/forms/index.html or by adding an Authorized User to Bill+Payment. Instructions on how to add an Authorized User to Bill+Payment are available on the Student Accounts website at https://willamette.edu/dept/studentaccounts/billing/index.html. I further understand that I may revoke my permission at any time as instructed in the same procedures.

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 the University are a necessity, and I am contractually obligated pursuant to the “doctrine of necessaries.”

Entire Agreement

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

By checking “Yes, I have read and agree to all terms and conditions of financial responsibility” on the WebAdvisor agreement page, I am entering into this Willamette University Student Financial Responsibility Agreement, which shall be binding and effective on the date captured by my electronic signature.