# AURORA UNIVERSITY

**Student Accounts:** (630) 844-5470 **Fax**: (630) 844-3831 **Email:** student.accts@aurora.edu This party will pay AU directly. (Continue with this form)

I am expecting this party to pay me directly. (Do not continue with this form. Use the Application for Deferred Payment Plan.)

# **Expected Third Party Payment Application**

Students whose tuition costs are paid directly to the university (either in full or in part) by their employer or other grantor may be eligible to participate in the Aurora University Third Party Payment Plan. Students must return this application, once completed by the student and employer/third party, to the Office of Student Accounts by the end of the second week of the 16-week semester. This holds true for all courses regardless of start date, such as Module 2 courses.

Late or incomplete applications may result in late fees and/or registration holds. All tuition is payable and due per posted university policies and the Financial Responsibility Agreement. Please note, if the student expects funds to be remitted directly to the student and not the university – this plan does not apply. Please see the university Deferred Payment Plan option.

Upon acceptance, the amount of tuition assistance indicated below will be applied to the student's account with all other financial aid, if any. All amounts not covered by the third party are due and payable per the university posted due dates. Students are welcome to enroll in the university's monthly payment plan available on the student payment portal.

The third party is required to remit tuition assistance payments to the university within 45 days of the end of each semester. If the third party fails to pay the university within 45 days, the student is responsible for any unfunded balance plus late fees and a \$10/credit hour processing fee.

#### By signing below, you acknowledge the following:

- I am fully responsible for paying all university tuition and fees regardless if or when the employer/third party named below remits payments to the university under any tuition assistance program.
- I understand that should the employer/third party named below fail to pay the assistance amounts listed below within 45 days of the end of the semester, I am responsible for any unpaid balance plus any late or processing fees.
- I understand that failure to pay tuition and fees by the university's posted policies may result in late fees, registration holds, diploma holds, and ineligibility to participate in future Third Party Payment Plans.
- I may apply for financial aid and/or enroll in a monthly payment plan to pay for those tuition and fees assessed by the university but in excess of any tuition assistance benefits listed below.

## Part I: To Be Completed by Student

Student Name:	ID#:	
Contact information (if d	fferent than on file with AU):	

Semester (Circle One):	FALL 20	SPRING 20	SUMMER 20	
Course Number/Tit	:le		<u>Semester Hours</u>	Institution notes:
				Late Fees Assessed:
				Processing fee Assessed:
				Date of Processing:
Student Signature:		·	Date:	

### Part II: To Be Completed by Employer

Third Party Name

I certify that the individual named above is eligible for tuition assistance in the amount(s) indicated below. I further certify that such assistance is to be paid to the university directly upon receipt of final grades within 45 days of the end of each semester.

Address:	
Contact Name:	
Contact Phone:	
Contact Email:	
Do you require an invoice from AU to remit payment: Y N Email invoices to be sent to:	
Amount of Tuition Assistance available based on courses listed above:	
Authorized Signature: Printed Name and Title:	Date: