MANHATTAN COLLEGE
1853
Student Accounts and Bursar Services

DEFERRAL APPLICATION AND PROMISE TO PAY
Term: Fall 2018

Office of Student Accounts and Bursar Services ● (718) 862-7961 ● email: studentaccounts@manhattan.edu

Last Name: [_____]   First Name: [_____]

ID #: [_____ - _____ - _____]

Email: *
Mandatory field [_____]   Day Phone: [(____) ____ - ____]

I am requesting a deferral of payment deadline in the amount of
(List current outstanding balance. Do not subtract any pending financial aid or loans) $ [____ , ____ . ____]

Reason for request: *(check appropriate box and provide details)*
Documentation of any third party payment must be submitted with this form.

□ Verification pending: All documents must be submitted and balance minus expected aid must be paid prior to approval of deferment. Documents submitted to financial aid on _____/_____/_____

□ Loan pending
   Type/lender: _____ Promissory note completed on: _____
   (for Stafford loans, ENT & MPN must be completed and for PLUS, Approval and MPN required)

□ Waiting for funds to be available (please be as specific as possible and submit 3rd party documentation).
   Fund source/ amount:_____ Date anticipated: _____

□ Other: _____
   _____

This **DEFERRAL AND PROMISE TO PAY**, if approved, is my personal obligation. Signing this statement obligates me to make payment in full by the agreed date, **the Fall 2018 deferment deadline is September 30, 2018.** If my request is based on anticipated financial aid or other funding, failure to receive such funds does not excuse my financial obligation to make payment in full of the amount shown or the balance on my student tuition account, whichever is greater. I understand my student tuition account will be charged a fee of $100 to execute this agreement, and it must be paid in advance or at the time of the deferral application. Only deferrals accompanied with the $100 fee can be processed. Deferrals can be processed in person or faxed with a credit card payment authorization form (see last page for details). * Even if my payment is initially processed, I understand that final approval of my deferral will be made by the Bursar and my approval will be emailed to me by the start of the semester.

This deferral, when approved, serves as a PAYMENT ARRANGEMENT for the term noted above and you will not be dropped or disenrolled from your courses. Non-attendance does not constitute reversal of tuition/fees liability. When this document is processed by the Office of Student Accounts and Bursar Services, the student incurs full liability for the amount shown herein or the total balance of the term account, whichever is greater. Failure to pay this account by the approved deferral due date will result in the imposition of additional fees and a block on student's records, grades, transcripts and future registration at Manhattan College. Please note the College charges a 1% interest penalty per month, on any balance greater than thirty days.

I fully understand the terms and conditions of this DEFERRAL AND PROMISE TO PAY and fully accept this debt as my personal responsibility. I will make payment in full on or before the agreed deferral due date assigned by the Office of Student Accounts and Bursar Services. I further understand, and agree to reimburse Manhattan College the fees of any collection agency, which may be based on a percentage at a maximum of 40% of the debt, and all costs and expenses, including reasonable attorneys' fees, incurred by Manhattan College in such collection efforts. Furthermore, I authorize Manhattan College and/or its agents to contact any school, employer or other parties to obtain information concerning my status or other information necessary in the collection of any debt owed the college. Also, I agree that by providing my mobile phone number, I authorize Manhattan College and their agents to contact me regarding payment matters.

_____   _____
Student Signature/Date   Parent Signature/Date

[_____]

Bursar Authorization/Date

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Deferral Applications can be filed:

- **In person-** visit the Office of Student Accounts and Bursar Services in Miguel Hall, Room 100
- **Email-** send as a scanned PDF attachment to StudentAccounts@manhattan.edu

Submit these two pages along with:

(1) The complete application with **student signature** and a **valid email address**
    -Parent signature optional. MC email address will be used as the default method of communication.

(2) Payment of **$100** – use the credit card authorization form below if faxing/scanning:

MANHATTAN COLLEGE CREDIT CARD PAYMENT FORM
(Please print)

_____ _____ _____   _____
Social Security Number   **Street Address**

_____   _____ _____ _____
Student Name   **City**   **State**   **Zip Code**

Select Card Type: **MC**   **VISA**   **AMEX**   **DISCOVER**

_____/_____   _____   _____ - _____ - _____ - _____
Expiration Date   **CVV Number**   **Credit Card Number**

$_____   **Print Name as it appears on card:** _____
Charge Amount

Cardholder's Signature: _____