Financial Responsibility Agrowed.

x I understand and agree

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- x I understand and agree that if I drop withdraw from some or all of the classes for which I the sister is the started with the solution of the classes for which I the solution of the soluti

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- x I further understand that my failure to attend class or receivell does not absolve me of my financial responsibility as described above.
- x I uand that my TJ 0 Tc 0 Tw 22.457 0 Td [()9 ()]TJ EMC /P <</MCID 48 >>BDC -22.457 -1.217 Td ()

- X I understand that my Financial Aid Award is contingent upon my continued enrollment and attendance in each class upon which my finanzialeligibility was calculated. If I drop any class before completion, I understand that my financial aid eligibility may decrease and s all of the financial aid awarded may be revoked.
- X 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.
- X I agree to allow financial aid I receito pay any and all charges assessed to my account at Western Illinois University such as tuition, fees, campus housing and meal plans, studen insurance, parking permits, service fees, fines, bookstore charges, or any other amount, in accordance with the terms of the aid.

Returned Payments

- x I understand and agree that 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 \$25.00.
- x I understand that multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I sign with Western Illinois University may result in cancellation of my classes and/or suspension of my eligibility to register for future classes at Western Illinois University.

Past Due Student Accounts/Collection

Financial Hold

I understand and agree that if I fail to pay my student account bill or any monies due and owing the scheduled due date, WIU will place a financial **boold** hy student account which will prevent me from registering for future classes.

Late Payment Charge

I understand fi I fail to pay my debt in full on the date specified on my Student Account, I will be assessed monthlyfinance charge f 1% on the past due balance.

Collection Fees

I further understand and agree the University may refer my past due account for collection and may authorize legal action against me for the collection of any monies owed to the university. I agree to be liable for any and all collection costs, including attorney fees, court costs, and other charges necessary for the collection of my past due account up to 50% of any monies due to the university.

Communication

Method of Communication

I understand and agree that Western Illinois University users it as an official method of communication with metherefore, I am responsible for reading the mails I receive from Western Illinois University on a timely basis.

Contact

I authorize Western Illinois University and its agents and contractors to contact me at my current and any future cellular or landline phone number(s), mailing address, email address(es) or wireless device(s)regarding my delinquent student account(s)/loans(s), any other debt I owe to Western Illinois University, or to receive general information from Western Illinois University. I authorize Western Illinois University and its agents and contractors to use automated telephone dialing equipment, artificial or prerecorded voice or text messages, and persionalls and emails, in their efforts to contact me. Furthermore, I understand I may withdraw my consent to call my cellular phone using automated telephone dialing equipment by submitting my request in writing to the Billing and Receivables Office or in writing to the applicable contractor or agent contacting me on behalf of Western Illinois University.

Updating Contact Information

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