

Tuition Deferment Plan Information

Telephone: 513-244-4418 Fax: 513-244-4201 Bursar@msj.edu

Students eligible to receive employer tuition reimbursement may participate in the Mount St. Joseph University's Tuition Deferment Plan to pay for their tuition. The following are required each term:

- A Tuition Deferment Plan application form must be completed each semester term and returned to the Student Administrative Services Office with manager's signature. A copy of the Employers' Tuition Assistance Program Policy stating the total yearly allowable reimbursement in dollar amount must be attached.
- 2. Payment of 1/3 tuition and \$15.00 Administration Fee by the confirmation date for **each** semester term you participate in the Deferment Program. (*The \$15.00 Administration Fee is non- refundable if your semester classes are dropped*)
- 3. Remainder of tuition is **due 45 days** after last day of the semester session. Service fees will not be charged during the deferment period. Monthly statements will continue to be available and email through the Student's My Nelnet Account.

Also, please note that a *transcript/diploma hold* will be placed on your student account. With this hold in place, any request for transcripts or diploma will not be honored until your account shows a zero balance. The hold will be removed within one week of receipt of payment in full. Contact Student Administrative Services Office at 513-244-4418 or by email to bursar@msj.edu if you need help with this form.

Mount St. Joseph University Deferment Plan (Must be submitted for each semester term)

Date:			ID:		Semester Term:	
Name: Last (Pleas	se Print)		First		M.I.	
Day Phone:				Evening Phon	e:	
List the course(s)	that will be re	imbursed by y	your employ	er:		
Cre dit Hours	Dept.	Course #		Course Name		
Calculate your ch					¢.	
1. Enter to	tal tuition and	iee charges io	r course(s) i	isted above:	\$ Total Charges	
Calculate	e <u>one-third</u> of yo	ur total charge	es:			
	\$	x	0.33	<u> </u>	\$	
	Total Charges	One-	Third		One-Third Charges	
	C					
					\$ <u>15.00</u> Administration Fee	
2 T.4.1			. 4			
 Total amount due by confirmation date: (Must be <u>PAID EACH</u> Semester Term) 					\$	

3. Remaind	ler due 45 day ; *******	s after last da: ******	y of term: ******	*******	\$ ****************	****
To be completed	by employer:					
		t amount ¢			☐ Fiscal ☐ Calendar	
Tearry allowable	Tellibul seillen	t amount 5			(Please check one)	
Manager's Signature Com		Compa	any Name	Date		
Personnel Contact			Person	nel Telephone No.		
			OEI	FICE USE ONLY		
	1. Coi	nfirmation amo	ount paid	4. C	Code/no serv. fee on:	

5. Code/subsidiary on:

2. Confirm session done:

3. \$ 15.00 Admin. fee on: