



Tuition Payment Information

Semester: _____ Session(s): _____

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Email: _____

I plan to cover my tuition expenses for the above named semester through the following
(check all that apply)

Financial Aid (grants, loans, scholarships, etc.)

Employer Reimbursement

Military funding (state, federal and/or Veteran's Administration)

Payment Plan

Cash/Credit card

Other (please specify)

I hereby grant Southwestern College full authority to credit federal or state financial aid directly to my student account. These funds may be used for payment of any tuition, books, supplies, and fees.

I agree to pay any balance remaining after payment from external funding sources (e.g. financial aid, employer reimbursement, military tuition assistance) have been applied to my account. Any balance remaining will be due in full by the last day of the semester for which I am currently registering.

I understand that failure to pay my tuition balance from prior enrollment periods may result in my not being allowed to enroll in future semesters.

Student Signature: _____

Date: _____