

New York Medical College

Graduate School Payment Plan Application Form

Please Note: Students are responsible for paying all New York Medical College fees at registration. The deferred payment plan is for tuition only. The payment plan is only available to students paying per credit tuition. The payment plan is not available to students who are billed out on a flat rate basis. This form requires a **\$40.00** service fee. **If you are doing mail in registration you must include all fees (network/activity) in addition to the payment plan service fee.**

I wish to apply for the NYMC Deferred Tuition Payment Plan for payment of my tuition at New York Medical College. I agree to pay a \$40.00 service fee and submit it with my application to the Office of the Bursar.

Please Print

- School of Health Sciences & Practice
- School of Basic Medical Sciences

Student ID # (or social security#) _____

Last Name _____ First Name _____

Street Address _____

City _____ State _____ Zip Code _____

I understand that all fees are due at the time of registration and only the tuition may be deferred into (4) payments. I understand that the payment is due in four equal payments on the following dates:

January 20, 2012 February 20, 2012 March 20, 2012 April 20, 2012

of credits _____ x \$835 _____ divided by 4 = \$ _____ Monthly Tuition Payment

I, the undersigned, agree to pay monthly installments to New York Medical College in lieu of full payment at registration. I understand that I must be taking at least 3 credits to sign up for the payment plan.

Should I default on my agreement, I understand that full payment will become due immediately and a \$100.00 late fee will be applied. I understand that if I default I will no longer have the option to use the payments in future semesters. Should payment not be made full, academic records will be withheld. Any student defaulting on this agreement will have their student account balance placed with a collection agency and a 30% collection fee added to the outstanding balance.

Signature

Date