

Statement of Financial Responsibility

Payment of Fees/Promise to Pay

I acknowledge that my registration at Lynn University involves my assumption of a definite financial responsibility. I understand that I am responsible for all costs, fees, and charges incurred and agree to remit payment accordingly. I further understand and agree that my registration and acceptance of these terms constitutes a promissory note agreement (i.e. a financial obligation in the form of an educational loan as defined by the U.S. Bankruptcy Code at 11 U.S.C. Statute 523(a)(8) in which Lynn University is providing me educational services, deferring some or all of my payment obligation for those services, and I promise to pay for all assessed tuition, fees and other associated costs by the published or assigned due date.)

I understand and agree that if I drop or withdraw from some or all of the classes for which I register, I will be responsible for paying all or a portion of tuition and fees in accordance with the published tuition refund schedule at:

- Day Undergraduate Students: <https://www.lynn.edu/admission/tuition-aid/undergraduate> click on Refunds
- Graduate Students: <https://www.lynn.edu/admission/tuition-aid/graduate> click on Refunds
- Online Students: <https://www.lynn.edu/admission/tuition-aid/online> click on Refunds

I have read the terms and conditions of the published tuition refund schedule and understand those terms that are incorporated herein by reference. I further understand that my failure to attend class or receive a bill does not absolve me of my financial responsibility as described above.

Receipt of a paper check authorizes the university to convert the check electronically and for the bank account to be debited on the same day. Paper checks will not be returned with the checking account statement.

Delinquent Account/Collection

Financial Hold: I understand and agree that if I fail to pay my student account bill or any monies due and owing Lynn University by the scheduled due date, Lynn University will place a financial hold on my student account, preventing me from registering for future classes, requesting transcripts, requesting enrollment verifications or receiving my diploma.

Collection Agency Fees: I understand and accept that if I fail to pay my student account bill or any monies due and owing Lynn University by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, Lynn University may refer my delinquent account to a collection agency. I further understand that I am responsible for paying the collection agency fee which may be based on a percentage at a maximum of 33% of my delinquent account, together with all costs and expenses, including reasonable attorney's fees, necessary for the collection of my delinquent account. Finally, I understand that my delinquent account may be reported to one or more of the national credit bureaus.

Communication

Method of Communication: I understand and agree that Lynn University uses e-mail as an official method of communication with me, and that therefore I am responsible for reading the e-mails I receive from Lynn University on a timely basis.

Contact: I authorize Lynn University and its agents and contractors to contact me at my current and any future cellular phone number(s), email address(s) or wireless device(s) regarding my delinquent student account(s)/loan(s), any other debt I owe to Lynn University, or to receive general information from Lynn University. I authorize Lynn University and its agents and contractors to use automated telephone dialing equipment, artificial or pre-recorded voice or text messages, and personal calls and emails, in their efforts to contact me. Furthermore, I understand that I may withdraw my consent to call my cellular phone by submitting my request in writing to the Office of Student Financial Services or in writing to the applicable contractor or agent contacting me on behalf of Lynn University.

Updating Contact Information: I understand and agree that I am responsible for keeping Lynn University records up to date with my current physical addresses, email addresses, and phone numbers by following the procedure at: https://www.lynn.edu/uploads/pdf/AcademicCatalog_20172018.pdf page 53

The linked procedure is incorporated herein by reference. Upon leaving Lynn University for any reason, it is my responsibility to provide Lynn University with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to Lynn University.

STUDENT INITIAL
& Date

Financial Aid

I understand that aid on my financial aid award letter does not represent actual or guaranteed payment, but is an estimate of the aid I may receive if I meet all requirements stipulated by that aid program.

I understand that my financial aid award is contingent upon my continued enrollment and attendance in each class upon which my financial aid eligibility was calculated. If I drop any class before completion, I understand that my financial aid eligibility may decrease and some or all of the financial aid awarded to me may be revoked.

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.

Method of Billing

I understand that Lynn University uses electronic billing (e-bill) as its official billing method, and therefore I am responsible for viewing and paying my student account e-bill by the scheduled due date. I further understand that failure to review my e-bill does not constitute a valid reason for not paying my bill on time. E-bill information is available at www.lynn.edu/ebill.

Billing Errors

I understand that administrative, clerical or technical billing errors do not absolve me of my financial responsibility to pay the correct amount of tuition, fees and other associated financial obligations assessed as a result of my registration at Lynn University.

Returned Payments/Failed Payment Agreements

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 \$20. I understand that multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I sign with Lynn University may result in cancellation of my classes and/or suspension of my eligibility to register for future classes at Lynn University.

Withdrawal/Leave of Absence

If I decide to completely withdraw from Lynn University, I will follow the instructions at:

https://www.lynn.edu/uploads/pdf/AcademicCatalog_20172018.pdf page 60 which I understand and agree are incorporated herein by reference.

IRS Form 1098-T

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to Lynn University upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to provide my SSN or TIN to Lynn University, I agree to pay any and all IRS fines assessed as a result of my missing SSN/TIN.

I consent to receive my annual IRS Form 1098-T, Tuition Statement, electronically from Lynn University. I understand that if I do not consent to receive my form 1098-T electronically, a paper copy will be provided. I understand that I can withdraw this consent or request a paper copy by following the instructions at:

<https://my.lynn.edu/ICS/Finances/1098T.jnz>

Privacy Rights & Responsibilities

I understand that Lynn University is bound by the Family Educational Rights and Privacy Act (FERPA) which prohibits Lynn University from releasing any information from my education record without my written permission. Therefore, I understand that if I want Lynn University to share information from my education record with someone else, I must provide written permission by following the procedure outlined at:

https://www.lynn.edu/uploads/pdf/AcademicCatalog_20172018.pdf page 55. I further understand that I may revoke my permission at any time as instructed in the same procedure.

Please initial and date the bottom right hand corner of the first page of this document

Name of Student _____

Signature of Student _____

Date: _____

ID Number: _____