

ISOTHERMAL

COMMUNITY COLLEGE

TUITION CONTRACT

(Please print all information)

NAME _____

SSN # _____

last 4 digits only

ADDRESS _____

TERM _____

Street or PO Box

HOME PHONE _____

city state zip

DATE OF BIRTH _____

WORK PHONE _____

mm/dd/yr

PLACE OF EMPLOYMENT

The section below must be completed by the Business Office

The undersigned agrees to pay Isothermal Community College the above term's tuition and any applicable fees in the amount of:

Tuition _____

BALANCE DUE TO BE PAID NO LATER THAN:

Fees _____

Due Date

TOTAL _____
Less 25% down Due when contract signed

Final Payment Date _____
Receipt # _____
Business Office Use

BALANCE DUE _____

Notes/Payments: _____

I understand that if I do not pay the balance in full by the above due date, I will be dropped from my classes. I understand that if I withdraw from the College after the period allowed to receive a refund, I owe and agree to pay any balance remaining according to the above. Failure to pay according to schedule will disqualify me for future tuition contracts. I also understand that I will not be allowed to register for classes again or obtain my grades or a transcript until the above balance due is paid-in-full. If my account remains outstanding 60 days past the above due date, I understand that my account will be turned over for collection proceedings.

Student's signature _____

Date _____

Controller/Assistant
Controller signature _____

Date _____