

**UNIVERSITY OF THE OZARKS
ACKNOWLEDGEMENT OF FINANCIAL RESPONSIBILITY
PARENT; RELATIVE; SPOUSE; ATTORNEY IN FACT**

STUDENT INFORMATION

Student Name: _____

Student ID: _____

Driver's License #: _____

BILLING INFORMATION

The following information must be completed and the statement at the bottom must be signed and dated by the individual who is assuming responsibility for payment of the student account. The student's signature is also required below. If any fields do not apply, please list "N/A."

Person responsible for payment: _____

Cell Phone: _____

Relationship to Student: _____

E-mail Address:

Address Line 1: _____

Social Security Number: _____

City / State / Zip: _____

Driver's License Number:

Home Telephone: _____

Employer: _____

Work Telephone: _____

Employer Address: _____

I accept responsibility for the payment of all charges on the student account of _____ during his his/her enrollment at the University of The Ozarks. In the event that charges are incurred by the above student and not paid when due and/or the University of the Ozarks refers these charges for collection, I promise to pay all attorney's fees and other reasonable costs of collection necessary for the collection of any amounts not paid when due. We authorize the University to contact any credit bureaus, creditors, or personal references to obtain information concerning my current address, phone number, or place of business. The undersigned knowingly and intelligently waive any defense that may be available by persons responsible for payment due to the passing any applicable statute of limitations.

Person Responsible for Payment: _____ **Date:** _____

Signature of Student: _____ **Date:** _____

Return completed form to Office of Administrative Services, by mail to: University of The Ozarks, 415 N. College Ave. Clarksville, AR 72830 or by email to: OAS@ozarks.edu

UNIVERSITY OF THE OZARKS

Student Acknowledgment of Financial Responsibility

This Acknowledgment will apply to the student's financial obligations to University of the Ozarks ("University") for each term of enrollment.

I understand my registration in courses at the University and by signing the this statement (whether via electronic registration or paper), I am certifying that it is my intent to sign this Student Acknowledgment, that I am submitting this Acknowledgment to the University, and that I have read, understand, and agree to the terms and conditions of this Acknowledgment. I am submitting this document in order to officially register for classes.

I further understand and agree to the following:

General Provisions:

- I am fully responsible for all charges incurred as a result of registration for classes, enrollment in or cancellation of housing and meal plan agreements, and associated fees, interest, and late charges, as published in the University catalog and/or on the University website, as well as any fines imposed by the University for violation of its policies.
- All tuition, fees, and other charges must be paid in full by the date established by the University for each semester, or by the date set in an approved payment plan, and if payment is not received or deferred by the due date, I will be assessed late fees which are my responsibility to pay.
- If I decide not to attend the University, I am responsible for **formally dropping or withdrawing from classes. Nonattendance of classes is not considered an official withdrawal, and does not relieve me of my financial obligation or entitle me to a refund.**
- **If I withdraw after the start of the semester, I may be responsible for charges in accordance with the University's Refund Policy.**
- If I am suspended or expelled from the University, all tuition and fees are forfeited, and I am responsible for paying all unpaid tuition and fees.
- This agreement will be in effect until I have fulfilled all financial obligations to the University.
- I am responsible for maintaining my current name, address, phone number and social security number with the Office of Administrative Services.
- The University's main source of communication is through the email account provided to me. I understand that it is my responsibility to check this email account for notices regarding my account at the University.
- I understand that my student account invoices are only available electronically and that I will be notified via my email account once they are available to view. I further understand that I have 24/7 access to my student account information and I am responsible to retrieve my student account invoices online to view my balance for each semester I am enrolled.
- I am responsible for reviewing, understanding, and abiding by the University's policies, procedures, and deadlines, as described in all official University publications, including but not limited to the University catalog and the University website.

- I authorize the University and its agents and contractors to contact me regarding my student account or any other aspect of my attendance at the University at the current or any future number that I provide for my cellular phone, home phone or other wireless device using automated telephone dialing equipment or artificial or pre-recorded voice or text message.

Payments and Financial Aid

- If payment is made by paper or electronic check and the check is returned for any reason, I understand that a returned check fee will be charged to my student account at the published rate.
- I will apply monies received from Financial Aid sources (including, but not limited to, Direct Loans, Pfeffer Loans, alternative loans, scholarships and/or grants) to pay for the charges on my student account, in accordance with the terms and conditions from Financial Aid.
- If I expect financial aid to pay all or part of my financial obligations to the University, I understand that it is my responsibility to meet all requirements for disbursement to my student account. In the event that financial aid is reduced or canceled, or if I have not met the specified requirements for receiving such aid, I will become responsible for the full balance of outstanding charges on my student account.
- Dropping or withdrawing from classes may result in a loss of financial aid for the current and/or future terms and I am responsible to reimburse the University for any portion of a refund that I received based on financial aid funds for which I later lose eligibility due to nonattendance, dropping or withdrawing from classes.

Failure to Make Payment By the Due Date Shall Result in the Following:

If I fail to pay the full balance due by the due date, the University may exercise any remedy allowed by law, including one or more of the following:

- 1) The University may bar me from further enrollment, graduation and receipt of transcripts and diplomas until the balance is paid in full.
- 2) Interest in the amount of the highest legal rate per month may be added to unpaid balances after the term ends.
- 3) My account may be assigned to a collection agency or law firm. I will be responsible for all costs and expenses associated with the collection of unpaid amounts, including the fees of any collections agency, which may be based on a percentage of the total balance due (up to a maximum of 45% of the total balance due) and reasonable attorney's fees.

Student Name: _____

Student ID: _____

Driver's License #: _____

Date: _____