

**Defiance College
Employer Deferred Payment Option (DPO)
Application Form**

Students eligible for employer reimbursement of tuition and fees are able to defer their payment until 30 days after the end of the semester. This allows students time to submit their grades to employers and secure reimbursement. If the employer provides partial reimbursement, students may combine the DPO program with a monthly payment plan or pay the non-reimbursed portion at the end of the semester.

Instructions for DPO participation:

Submission/completion of the following documents *prior* to published financial clearance due date for the semester.

1. Completed application for deferred payment (both pages)
2. Documentation of employer tuition reimbursement eligibility (either an employer signature or copy of approval paperwork from employer)
3. Completed Registration Agreement in MyDC (completed at time of scheduling)

Please return the application and accompanying documentation to the Defiance College Business Office, Defiance Hall 213 or email to businessoffice@defiance.edu. Contact the Business Office for assistance at 419-783-2550.

Student Information

Academic Year: _____ Semester: Fall____ Spring____ Summer____

Name: _____ Student ID _____

Current Address: _____

City: _____ State: _____ Zip: _____

Home Telephone: _____ Work Telephone: _____

Email address: _____

Employer Contact Information

Employer Name: _____

Employer Contact: _____ Title: _____

Phone Number: _____ FAX Number: _____

Employer Address: _____

Email address: _____

If you are not required to complete pre-approval paperwork for your employer, please complete the following:

Eligible Tuition Amount _____ Eligible Fees Amount _____

Employer Contact Signature _____

I, the undersigned, hereby promise to pay Defiance College under the terms and conditions of this option.

- ***I understand that I am responsible for any unpaid balance.***
- I may be charged a \$100 late fee to the college if I fail to submit the signed DPO paperwork by the financial clearance due date at the start of the semester.
- I will pay the student account balance in full within 30 days of grades being posted for the semester.
- I also understand that failure to meet any of the terms of this payment option may cause any participation in this option to be cancelled.
- I understand that if payment is not made by the due date, the result will be “Financial Hold” on my account, which will prevent further registration and restrict my ability to receive official college documents such a transcript or diploma.
- I understand that if this is my final semester prior to graduation, my diploma will be held until payment in full is made for the term.
- I further understand that if I fail to repay the balance as agreed, collection action will be taken against me and I will be dropped immediately from any enrolled course.
- I understand that I will be assessed and required to pay any costs incurred in the collection process of this balance including, but not limited to, collection and litigation costs.
- I understand that Defiance College has reserved the right to cancel this agreement at any time should the above information change.

Student Signature Date

Printed Name