

Employer Deferred Payment Plan (EDpay)

The Employer Deferred Payment Plan (EDpay) is available to those students who have an employer who is helping to fund their education through a tuition reimbursement program. Because most employers want to verify satisfactory completion of courses before tuition is paid on behalf of an employee, the EDpay plan allows students to extend their tuition payment due date to 40 days after the last day of the standard semester. Interest will not be charged on the unpaid balance during the deferment period. The first and only statement will be sent at the end of the semester.

To take advantage of EDpay, a student must:

- 1) Complete a course registration and EDpay form. A student who registers for classes should be prepared to present a completed EDpay form when registering for courses. Class registration will not be entered until the EDpay form is received. A new EDpay form is required for each semester the student registers.
- 2) Submit payment by the deadline for the appropriate semester. The student is responsible for payment of his/her tuition by the payment deadline date even if the student has not received reimbursement from the employer. Failure to make full payment of the tuition by the due date could cause several actions:
 - A) A late fee of \$75 will be added to the student's account, and the total balance due on the account will be charged to the credit card number submitted on the EDpay form. In addition, a 2.75% credit card convenience fee will be charged.
 - B) If the balance due cannot be paid in full with the credit card (card is rejected, too low of a limit, etc.), a registration hold will be placed on the student's account. The student will not be permitted to register for subsequent semesters until the balance is paid in full. A student who has already registered for the next semester will be administratively withdrawn from his/her courses.
 - A transcript hold will be placed on the student's account. The student will not be able to receive an official academic transcript until the balance is paid in full.
 - A diploma hold will be placed on the student's account.
 - An interest charge of 1.5% of the unpaid balance will be charged on a monthly basis until the balance is paid in full.
 - The student will lose eligibility to use the EDpay option in the future.
 - The student may be assigned to a collection agency for payment.

Additional Information:

- 1) Wilmington College does not permit the use of a debit card for the card number you submit. Most debit cards have a daily maximum; therefore, debit cards will not be accepted due to the large amount that could be charged.
- 2) Submit all the paperwork to your employer as early as possible so that payment may be processed and sent on time. Students may obtain their grades from their WebIT computer account.
- 3) If the student changes employers, the student must complete a new EDpay form. Students are also expected to inform the Student One Stop Center in writing if tuition reimbursement benefits are no longer available from the employer. When notification is received from the employer, the financial aid award will be recalculated accordingly (if applicable) and the student will end participation in the EDpay plan and will follow the regular college payment schedule.



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Employer Deferred Payment (EDpay) Form

<u>Instructions for the student</u>: Please complete Section I of this form, then submit it to your employer's Education Benefits Officer to complete the employer section located on the reverse side of this form. If Wilmington College has a current copy (less than 2 years old) of your tuition reimbursement policy, you do not need to complete Section II.

SECTION I – To be completed by the student.				
Name	_ ID#	ID# Home Phone Work Phone		
Address	Home Phone			
Email Address_	_ Work Phon			
Semester (indicate year for appropriate semester): Summer 20	Fall 2011	Spring 20		
Campus (check one): Blue Ash Cincinnati State				
Did you/Will you file the Free Application for Federal Student Aid (FA Are you currently employed? Yes No (If no, stop If yes, are you utilizing tuition reimbursement benefits this term?	here.)	Yes No No (If no, stop here.)		
I, the undersigned, understand that under this agreement, payment of the full account, is due to Wilmington College within 40 days after the end of the standard Formula Formu	andard semester.	TUITION REIMBURSEM	ENT	
I have provided the account number of a current, valid credit card below. As after the end of the semester, my credit card will not be charged. If I become employer for any reason I understand that I am still responsible for full, provide I certify that the information below is valid and is being accepted in good fa	e ineligible for pa mpt payment of n	ayment or reimbursement fi my charges at Wilmington (rom my	
If any of the information below is found to be false, I understand that Wilmi account to a billing/collection agency, and that if such steps become necessareasonable costs and expenses in the collection or enforcement of this agree cancel this agreement at any time, for any reason.	ary, that I am resp	onsible for all of the Colle	ege's	
I authorize this credit card to be charged the unpaid amount due on my \$75 if Wilmington College has not received payment in full by the Payn further understand that a 2.75% credit card convenience fee will be adwillington College permission to release information about my finance requested.	nent Due Date fo ded to this charg	or the semester indicated. ge. In addition, I give	. I	
Student Name	ID#_			
(Please Print Clearly)				
Cardholder Name (Please Print Clearly)	_ Credit Card	#		
Credit Card Type: American Express MasterCard Disc	eover Exp. D	Pate(MM/YY)		
Cardholder Signature	Date			
	nington College at C 1 330 – Business Tecl 3520 Central Pa Cincinnati, OH 452	hnology Division arkway		
I will be utilizing my company's tuition reimbursement benefit. I give my emploinformation on tuition reimbursement that I have received or may receive in the		release to Wilmington Coll	lege the	
Student's Signature				

SECTION II – To be completed by employer's educational benefits officer.

Employer or employer representative, please complete the following section of this form in order to allow the student/employee named to defer payment of his/her tuition bill based upon the student receiving payment or reimbursement from your organization. Upon completion, either drop off or mail this document to the appropriate office listed below.

I certify the student named on the reverse side of this form is eligible for tuition reimbursement for the semester indicated and will receive tuition reimbursement for the course(s) completed upon meeting the requirements of the company's tuition reimbursement plan. <u>I have attached a copy of this company's tuition reimbursement policy to the form.</u>

Company Name	Phone Number			
Company Address	City	State	Zip	
Name of Authorized Representative (please print)	Fax or email addres	SS		
Signature of Authorized Representative	- Date			

Wilmington College – Blue Ash 9987 Carver Road, Suite 100 Blue Ash, OH 45242 Wilmington College at Cincinnati State Room 330 – Business Technology Division 3520 Central Parkway Cincinnati, OH 45223-2690