



Middlesex Community College
 100 Training Hill Road
 Middletown, CT 06457
 1.800.818.5501 toll free
 860.343.5800 phone
 860.344.7488 fax

Pharmacy Technician Program Tuition Installment Plan Agreement

MxCC Pharmacy Technician Certificate Program Tuition Installment Payment Plan Agreement Spring 2018

This plan will allow you to register in a timely manner while meeting your financial obligations.

A tuition installment payment plan is available to students enrolling in the Pharmacy Technician Certificate Program. It allows students to defer the payment of tuition for a non-refundable fee of \$25. This fee, along with the first payment of the course tuition, must be paid at the time of registration. Students wishing to use the tuition installment payment plan must complete this agreement. Students failing to make timely payments will not receive course verification, clinical evaluation, and certificate. A late payment fee of \$15 will be charged for all payments received after the published due dates. Unpaid amounts will be referred to collection. If student fails to make payments of amounts due on or before the due date, MxCC reserves the right to administratively withdraw student from the program and make students permanently ineligible for future payment plans.

Note: Completion of this agreement fully obligates students to fulfill the payment agreement. A \$25 non-refundable plan fee will be charged to each student. No payment reminders will be sent to you, so please keep your "Student Copy" for reference. Please complete both sections of this agreement and bring with payment to the Business Office, Founders Hall, Room 113 upon registration. All installment payments must be made to the Business Office.

STUDENT ID: _____
 Student Name: _____
 Address: _____
 Phone (home) _____ (cell) _____
 Email: _____

Payments:	Upon Registration:	\$ 375*	<i>*Includes \$25 non-refundable plan fee</i>
	Second Payment:	\$ 350	
	<u>Final Payment:</u>	<u>\$ 349</u>	
	Total:	\$ 1,074	

I promise to make full payment in accordance with the payment dates and amounts shown on the chart on the back page. I understand that if I fail to meet the full payment of this note on or before the date indicated, I may be withdrawn from the College but continue to be responsible for the entire amount. I will not receive a certificate for the course. I will be assessed \$15 for each payment received late, after the dates indicated. I will be denied course verification, clinical evaluation, and references. Additionally, should I default on this note, I acknowledge the right of the college to forward the note to a collection agency. I understand that failure to meet the payment schedule will make me ineligible for future payment plans. I acknowledge that I have received the Student's Copy as my official copy of this agreement and have accepted its terms.

Student Signature: _____ Date: _____
 College Official: _____ Date: _____

STUDENT COPY



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Pharmacy Technician Certificate Program (CRN# 1448) Spring 2018

TUITION INSTALLMENT PAYMENT PLAN SCHEDULE OF PAYMENTS

Program Dates 2018	Total Tuition	First Payment	Installment Plan	Due At Registration	Second Payment Due Date	Second Payment	Final Payment Due Date	Final Payment	Total Cost
03/06/18 – 05/10/18	\$1,049	\$350	\$25	\$375	04/06/18	\$350	05/03/18	\$349	\$1,074