STUDENT FINANCIAL RESPONSIBILITY AGREEMENT

By enrolling in the University of Connecticut, I represent that I have read, understand, and agree to the terms and conditions set forth below.

PAYMENT OF TUITION AND FEES / PROMISE TO PAY

I understand that when I enroll at the University of Connecticut (the “University”) or receive any service from the University, it is my responsibility to pay, by the scheduled due date, all tuition, fees and other associated costs assessed as a result of my enrollment and/or receipt of services.

I understand and agree that if I drop or withdraw from some or all of the classes for which I register, I will be responsible for paying all or a portion of my tuition and fees in accordance with tuition refund schedule published on the Office of the Bursar webpage.

I further understand that my failure to attend class or receive a bill does not absolve me of my financial responsibility as described above.

BILLING ERRORS

I understand that administrative, clerical or technical billing errors do not absolve me of my financial responsibility to pay the correct amount of tuition, fees and other associated financial obligations assessed as a result of my enrollment at the University.

OVERDUE PAYMENTS

Financial Hold: I understand that if I fail to pay my student fee bill or any monies due and owing the University by the scheduled due date, the University will place a ‘Bursar hold’ on my student account, preventing me from registering for courses and accessing services such as recreation services, library services, parking services, obtaining transcripts and diplomas, and other important services. I understand that this hold will remain on my account until the balance is paid in full. I also understand that the University may decline to issue a certified copy of my academic transcript unless and until any past due balance owed by me is paid.

Late Payment Fee/Returned Payment Fee: I understand that if I fail to pay my student account bill or any monies due and owing the University by the due date, the University will assess late payment fees against me. I understand that the late payment fees charged to students by the University are set forth on the webpage maintained by the Office of the Bursar. I understand that payments returned by the bank for any reason will be considered a late payment. In addition, I understand that if a payment is returned by the bank for any reason, I will be assessed a returned payment fee. I agree to pay any and all late payment and/or returned payment fees assessed against me.

Collection Agency Fees: I understand that if I fail to pay my student account bill or any monies due and owing the University by the scheduled due date, and fail to make acceptable payment arrangements with the University to bring my account current, the University may refer my delinquent account to a collection agency. I understand and agree that I will be responsible for paying a collection agency fee of eleven percent (11%) of the amount collected and accepted as payment in full satisfaction of the debt, together with all costs and expenses, including reasonable attorney’s fees, necessarily incurred in the collection of my delinquent account.

Office of the Bursar
233 GLENBROOK ROAD, Unit 4100
STORRS, CT 06269-4100
PHONE 860.486.4830
FAX 860.486.5234
bursar@uconn.edu

An Equal Opportunity Employer
Finally, I understand that my delinquent account may be reported to one or more of the national credit bureaus.

**CREDIT AND DEBIT CARD PAYMENTS**

I understand that the University uses a third-party servicer to process all credit card and debit card payments and that credit card and debit card payments will be assessed a convenience fee which is due and payable at the time of payment. I agree to pay such convenience fees if I make payment via credit or debit card.

**COMMUNICATION**

I understand that the University uses electronic billing (e-bill) as its official billing method, and therefore I am responsible for viewing and paying my student account e-bill by the scheduled due date. I further understand that failure to review my e-bill does not constitute a valid reason for not paying my bill on time.

I authorize the University and its agents to contact me at my current and any future addresses, cellular phone number(s), email address(es) or wireless device(s) regarding my delinquent student account(s)/loan(s) or any other debt I owe to the University, or to communicate general information from the University. I authorize the University and its agents and contractors to use automated telephone dialing equipment, artificial or pre-recorded voice or text messages, and personal calls and emails, in their efforts to contact me.

**FINANCIAL AID**

I understand that aid described as “estimated” on my Financial Aid Award does not represent actual or guaranteed payment, but is an estimate of the aid I may receive if I meet all requirements stipulated by the relevant aid program. If my eligibility for financial aid changes for any reason, I understand that I will be responsible for any charges on my account that were previously covered by financial aid and that I will be responsible for repaying to the lender any credit balances that were refunded to me.

I understand and agree that the federal financial aid I receive will be applied by the University for the payment of mandatory fees, and fees for tuition and room and board, which I owe the University.

I further understand that if I want the University to apply my federal financial aid to other charges which appear on my fee bill during the academic year, I must complete a Title IV Financial Aid Authorization, which is available on the student administration system website, under the heading of “Student Help,” or by following this link:

studentadmin.uconn.edu/help/students/create-title-iv-financial-aid-waiver/

I understand that all prizes, awards, scholarships and grants awarded to me by the University will be credited to my student account and applied toward any outstanding balance owed the University. I further understand that my receipt of a prize, award, scholarship or grant is considered a financial resource under federal Title IV financial aid regulations, and may therefore reduce my eligibility for other federal and/or state financial aid (i.e., loans, grants, Federal Work Study) which, if already disbursed to my student account, may have to be reversed and returned to the aid source.

I understand that amounts I will owe for the repayment of my student loans may not be dischargeable in bankruptcy.

**WITHDRAWAL**

I understand that if I decide to completely withdraw from the University, I must follow the University’s withdrawal policies.

I understand and acknowledge that certain federal and Connecticut state laws and regulations will become applicable to me if I withdraw or drop below full-time status and have received financial aid for the semester or term. If I do withdraw or drop below full-time status, I understand that I must notify the Office of Student Financial Aid Services, and that I may:

- Have to return up to 100% of the financial aid funds which I have been awarded;
o Become ineligible for future financial aid;
o Be required to complete exit counseling; and/or
o Be required to commence loan repayment immediately.

PRIVACY RIGHTS & RESPONSIBILITIES

I understand that disclosure by the University of information contained in my education records, including financial records, is governed by the Federal Educational Rights and Privacy Act (FERPA) which prohibits the University from releasing any information from my education records without my written permission, except under certain limited circumstances. I understand that if I want the University to share information from my education records with someone else, I must provide written permission in accordance with University procedures. For more information, click on the following link. [https://ferpa.uconn.edu/share-my-information/](https://ferpa.uconn.edu/share-my-information/)

CONSENT TO ELECTRONIC TRANSMITTAL OF FORM 1098-T

I consent to receive my annual IRS Form 1098-T, Tuition Statement, electronically from the student administration system. I understand that my consent applies prospectively, to every year that a statement is furnished, unless and until I may withdraw this consent. To withdraw this consent or request a paper copy, I must submit my request in writing to the Office of the Bursar at 233 Glenbrook Road, Unit 4100, Storrs, CT 06269-4100 or 1098T@uconn.edu. To ensure accurate and timely reporting, I will keep my personal information, including my address, updated on the student administration system (instructions can be found by visiting the student administration system website under Students and Student Guides).

Additionally, I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to the University upon request as required by Internal Revenue Service (IRS) regulations. If I fail to provide my SSN or TIN, I understand that the IRS may penalize me under Section 6723 of the Internal Revenue Code, unless the failure is due to reasonable cause and not to willful neglect.

GOVERNING LAW

I agree that this Agreement will be governed by the laws of the State of Connecticut, without regard to its principles of conflicts of laws. I agree that the sole and exclusive means for the presentation of any claim, as defined in Section 4-141 of the Connecticut General Statutes, that I may have against the University or the State of Connecticut arising from this Agreement will be in accordance with Chapter 53 of the Connecticut General Statutes (Claims Against the State) and I agree that I will not initiate legal proceedings pertaining to such claim in any state or federal court in addition to, or in lieu of, those Chapter 53 proceedings. I agree that to the extent that any immunities provided by federal law or the laws of the State of Connecticut do not bar an action against the State, any suit, action or proceeding arising in connection with this Agreement will be brought only in the Superior Court for the Judicial District of Hartford, Connecticut, or in the United States District Court for the District of Connecticut, and shall not be transferred to any other court. I understand and agree that nothing stated herein constitutes a waiver or compromise of the sovereign immunity of the State of Connecticut.

APPLICABILITY/MODIFICATION OF AGREEMENT

I understand and agree that this Agreement shall apply to tuition, fees and other costs assessed by the University in connection with each semester and/or term during which I am enrolled at the University, and to any and all services received by me from the University at any time. I agree that this Agreement supersedes all prior understandings, representations, negotiations and correspondence between me and the University relating to the subject of this Agreement. I understand and agree that: (i) this Agreement may not be modified or affected by any course of dealing between the University and me; (ii) that this Agreement may be modified only by a modification signed by me; and (iii) any modification will be specifically limited to those terms and conditions addressed in the modification.

I understand and agree that if I am younger than the applicable age of majority when I execute this Agreement that the educational services provided by the University are a necessity, and I am contractually obligated pursuant to the “doctrine of necessaries.”