

I understand and agree to pay Western Illinois University all tuition and fees as a result of any past, current or future registration. I understand and agree if I do not cancel my classes during the published withdrawal dates I will be held responsible for paying all tuition and fees owed. I understand and agree to pay any additional charges incurred including but not limited to charges for room, board, parking, and class materials and any other departmental or college charges. I further understand and agree that my registration and acceptance of these terms constitutes a promissory note agreement in which Western Illinois University is providing me an education, and I promise to pay for all assessed tuition, fees and other associated costs by the published or assigned due date.

I understand that the University is advancing value to me in the form of educational services and that my right to register is expressly conditioned upon my agreement to pay the costs of tuition and fees and any additional costs when those charges become due. I understand that, regardless of my eligibility for financial aid, I am personally responsible for the full amount assessed to me as a result of my registration and attendance. I understand that my failure to attend class or receive a bill does not absolve me of my financial responsibility. If I fail to pay my debt in full on the date specified on my Student Account, I understand I will be assessed finance charges, a financial hold will be placed on my records preventing release of academic transcripts and restricted registration activity in accordance with University policy.

I understand and agree that Western Illinois University uses e-mail as an official method of communication with me, and that therefore I am responsible for reading the e-mails I receive from Western Illinois University on a timely basis.

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 registration at Western Illinois University.

I understand and agree that if a payment made to my student account is returned by the bank for any reason, I agree to repay the original amount of the payment plus a returned payment fee of \$25.00. I understand that multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I sign with Western Illinois University may result in cancellation of my classes and/or suspension of my eligibility to register for future classes at Western Illinois University.

I further understand and agree the University may refer my past due account for collection and may authorize legal action against me for the collection of any monies owed to the university. I agree to be liable for any and all collection costs, including attorney fees, court costs, and other charges necessary for the collection of my past due account up to 50% of any monies due to the university. I authorize the University and/or its agents to utilize all contact information to collect any debt I owe to the University, including but not limited to cell phone numbers and email addresses I have provided to the University. I authorize Western Illinois 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. Furthermore, I understand I may withdraw my consent to call my cellular phone by submitting my request in writing to the Billing and Receivables Office or in writing to the applicable contractor or agent contacting me on behalf of Western Illinois University

I understand that the University will apply any financial aid awarded I may receive to all charges assessed to my account up to and including \$200 from any prior academic year. I understand I can cancel or modify my authorization at any time and the cancellation or modification is not retroactive.

I understand that Financial 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 that aid program. I understand that my Financial Aid Award is contingent upon my continued enrollment and attendance in each class upon which my financial aid eligibility was calculated. If I drop any class before completion, I understand that my financial aid eligibility may decrease and some or all of the financial aid awarded may be revoked.

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to Western Illinois University upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to provide my SSN or TIN to Western Illinois University, I agree to pay any and all IRS fines assessed as a result of my missing SSN/TIN.

I understand that Western Illinois University will deliver my IRS Form 1098-T electronically every year I have reportable transactions (for information about IRS Form 1098-T and Tax Benefits for Education, see [http://www.wiu.edu/vpas/business\\_services/billing/edcredit.php](http://www.wiu.edu/vpas/business_services/billing/edcredit.php)). If I require a paper form I understand that I can access this via <http://mvs.wiu.edu/stars.htm>.

I understand and agree that I am responsible for keeping Western Illinois University records up to date with my current physical address, email addresses and phone numbers. Upon leaving Western Illinois University for any reason, it is my responsibility to provide Western Illinois University with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to Western Illinois University.

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 Western Illinois University are a necessity, and I am contractually obligated pursuant to the “doctrine of necessities.”

This agreement is governed by the state of Illinois and the federal government.

**[I Understand and Agree to all Information Contained in this Document](#)**