

Payment Plan Agreement

CCON Student ID: _____ Semester (Fall or Spring): _____

Student Name: _____

Address: _____

City/State/Zip: _____

Overview

CCON offers a payment plan for the Fall and Spring semesters only. Payment plans are not available for the Summer semesters. Payment plans are administered by the Business Office. Total charges will be divided into 4 equal payments. Payments for Fall semester are in August, September, October, and November; payments for Spring semester are in January, February, March, and April. Please refer to your SONISWEB Student Account for actual payment amounts, due dates, and statements. Payments not received by the due date are considered late.

Your enrollment in this plan is based on your understanding and agreement to the following:

- Payment plans must be established each semester by the first day of class.
- A non-refundable payment plan set up fee of \$50 will be automatically billed to my account.
- Reminders of upcoming payments due will be sent to my ccon.edu e-mail address.
- Payment plans are only for current semester charges and past due charges must be paid prior to establishing the payment plan.
- A hold will be placed on my account if a payment is past due.
- A 1.5% late penalty will be assessed on the entire balance if a payment is past due.
- At 180 days past due, my account is considered delinquent and may be forwarded to a collection agency to collect the balance due.
- Withdrawing from CCON does not release me from this payment plan obligation, any financial penalties or other collection costs.
- To enroll in a payment plan, an Account Agreement and Disclosure Statement form also must be on file.

Student Authorization

As a Columbia College of Nursing student, I agree to pay my Student Account in full, in accordance with the payment plan terms, whether or not I receive Federal Student Aid from any source.

Student Signature: _____

Date: _____

Please return this form to: CCON Business Office
 Attn: Assistant Dean
 4425 North Port Washington Road
 Glendale, Wisconsin 53212
 ~OR~
 (Email) Christina.Italiano@ccon.edu / (Fax) 414-326-2331

Payments are made in the months shown below. Please refer to your SONISWEB account for actual payment amounts and due dates.

Payment #	Fall	Spring
1	August	January
2	September	February
3	October	March
4	November	April