

**Tuition Payment Deferment/Promissory Note
2024-2025 Academic Year**

Student Name (First & Last) _____ Student ID # _____

Primary Phone _____ Email Address _____

I request deferment of my tuition in the amount of \$ _____ for all following term(s):

Fall 2024

Spring 2025

Summer 2025

Third-Party Agency/Organization: _____

Billing Contact Name: _____

Primary Phone _____ Email Address _____

Promissory Note

In consideration of enrollment in my course of study, I promise to pay CWSL for all tuition and fees billed to my account, I further agree and contend that:

1. I have been authorized by the third-party agency listed above for payment of tuition and fees in the amount indicated and I understand that if there is any remaining balance due, I will pay the difference in full by the deadline as published on the Business Office [website](#).
2. I understand that this form will only be accepted if accompanied by a formal authorization for payment from the third-party agency indicated above and I authorize CWSL to contact my supporting organization to obtain eligibility documentation as needed.
3. I understand that any remaining balance (i.e.-not covered by third-party authorization) that is not paid on or before the scheduled due date(s); CWSL will assess a late payment fee at the rate of \$50.00 per month on the past due portion of my student account until paid in full. Furthermore, I understand that access to the CWSL Student Connection Web Portal, to include but not limited to: Class Schedule, Registration Activities including adding and dropping classes, and Academic Summary Information will be withheld until payment is made in full or a payment agreement is completed. In addition, failure to comply with the terms of this agreement will allow the school to terminate my enrollment, cease school services and demand payment of all amounts owed.

Any holder of the consumer credit contract is subject to all claims and defenses which the debtor could assert against the seller of goods or services obtained pursuant hereto or with the proceeds hereof. Recovery hereunder by the debtor shall not exceed amounts paid by the debtor hereunder.

I have read the Business Office Policies and Procedures and agree to be bound by the rules therein.

Student Signature: _____ Date: _____

Accepted by: _____ Date: _____

Completed Forms should be uploaded via the [secure portal](#).