

PAYMENT PLANS

STUDENT CHECKLIST

ELIGIBILITY FOR PAYMENT PLANS

PLEASE NOTE: You are NOT eligible for a Payment Plan if you have any outstanding accounts with the College.

- A. Domestic Students – (Students not eligible under sections B or C below)
- Students with **tuition fees greater than \$400** may set up payment plans.
 - **Apprenticeship/practicum courses are not eligible.**
- B. International Education Students
- Contact International Education **(250-561-5857)** to book an appointment to discuss a payment plan.
 - Once approved, take paperwork to financial services to set up payment plan.
- C. Community/Continuing Education Students
- Students seeking a payment plan must have tuition greater than \$600 and program lengths of 60 hours or more in length which run for a period of at least 4 months.
 - Students meeting the above criteria must contact Community & Continuing Education at **(250-561-5846)** to book an appointment to discuss payment plan eligibility.
 - Once approved, take paperwork to financial services to set up payment plan.

FINANCIAL SERVICES PAYMENT PLAN

Please bring:

Fully completed **Payment Plan Form** (attached)

Your registration statement

Verification for source of payments (RESP statements, pay slips, letters of employment or letters of guarantee from parents/guardians)

Your guarantor must come with you if you are under 19 OR unemployed

A down payment in the amount of:

- 25% of tuition/fees owing, or
- Seat fee, or
- a combination of 25% tuition and seat fee
- An amount specified on departmental approval whichever is greater

If applicable the payment plan approval form from International Education or Community/Continuing Education

PLEASE NOTE: Textbooks and other supplies not on your registration statement do not qualify for a payment plan

**COLLEGE OF NEW CALEDONIA
PAYMENT PLAN FORM**

Finance Use Only

Term _____

Payment Plan # _____

(PLEASE PRINT)

PERSONAL INFORMATION:

Student #: _____

Driver's Licence # (or other Government ID) _

Full Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____ Phone #: _____

Employer's Name: _

Address: _____ City: _____

Province: _____ Postal Code: _____ Phone #: _____

If under the age of 19 or you are unemployed you must be accompanied by a parent, guardian or guarantor:

Guarantor Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____ Phone #: _____

The information above is for the purpose of obtaining credit and is warranted to be true. I agree to pay all bills upon receipt of invoice or as otherwise expressly agreed.

I hereby authorize the College of New Caledonia to obtain such credit reports or other information as may be deemed necessary with the establishment and maintenance of a credit account or for any other direct business requirement. This consent is given pursuant to Section 12 of the Personal Information Reporting Act, S.B.C. 2003.

Signature

Date

Witness

Date

Signature of parent, guardian or guarantor