

Deferred Payment Plan Application

The Deferred Payment Plan (DPP) allows your registration fees, to the extent not covered by financial aid, to be paid in monthly installments. To apply for DPP, complete and return this application with the appropriate nonreturnable application fee (see below) to the Office of Student Business Services, 1156 High St., 203 Hahn Student Services, Santa Cruz, CA 95064. The application, fee, and the first installment are due before the quarter begins. DPP applies to registration fees only; health insurance is not included in DPP. Please contact the on-campus Housing Office at (831) 459-2394 to arrange a housing payment plan. Make checks payable to UC Regents.

Nine-month plan (fall, winter, spring quarters)—\$60 Application Fee (available fall quarter only)

Three-month plan (one quarter)—\$25 Application Fee

Student Name _____ Student E-mail Address _____

Student ID Number* _____ Local Phone _____

Street Address _____ City, State, Zip _____

I, the undersigned, do hereby agree to have my registration fees, as established by the Regents of the University of California and billed by the Santa Cruz campus, divided into monthly installments. I understand the application fee is nonrefundable. I agree to inform the Office of Student Business Services immediately of any address changes, and I maintain responsibility for my account.

I understand that if I do not pay by the due date as stated on my Statement of Account, I will be assessed late fees. The first DPP late fee is \$50. Subsequent DPP late fees are assessed at \$15 per billing cycle. I understand that failure to pay may result in the university withholding all services, including class enrollment, registration, and official transcripts. I understand that in the event of nonpayment, the university has the right to terminate this agreement and declare the entire balance, plus applicable late fees, due and payable.

I understand that registration fees are subject to change, which may cause an adjustment to my payment plan. I also understand that if my student status changes, I am responsible for notifying the Office of the Registrar. Such a change could also result in a change of my payment plan.

I acknowledge that I have read, understand, and agree to the terms and conditions as set forth in this Deferred Payment Plan Application and Payment Agreement.

Student Signature _____ Date _____

*The student number requested on this form is not your Social Security number. The only number students should use is their seven-digit student ID number, not their Social Security number. The principle use of the number shall be to verify your identity in the Academic Information System and to locate and maintain your records.

**Contact the Office of Student Business Services to determine the amount of your first payment at (831) 459-2107, or e-mail oarinfo@ucsc.edu.
Fax your application to (831) 459-3918.
For more information about DPP, see our web site at <http://sbs.ucsc.edu/dpp.html>.**

