



Master's Program Deferment Form

Semester: (Circle one) Fall Spring

Year: _____

Student Name _____

**Deferred Amount \$ _____

Student ID# _____

**This is the amount that your employer will pay.

Master's Program _____

Master's Program Student:

York College of Pennsylvania allows the student enrolled in the master's level program to defer payment until he/she receives reimbursement from his/her employer.

The following conditions strictly apply:

1. Deposits are required prior to registering for classes.
2. The Master's Program Deferment Form is required to be submitted to the Business Office *each semester prior to the due date of the e-bill for that semester.*
3. A copy of your employer's reimbursement policy must be attached to this form.
4. The difference between your expected employer reimbursement and the total amount due on your e-bill is expected to be paid on or before the due date of the e-bill.
5. Full payment for the semester is required within 30 days of the semester end or before classes begin for the next semester, whichever is sooner. Bills not paid in a timely manner will receive a financial hold as well as a \$100 late fee.
6. Additionally, if the bill remains unpaid, your account may be referred to a collection agency. By signing this form, you agree that you are responsible for paying the collection agency fees which may be based on a percentage, at a maximum of 40%, of the debt, together with all costs and expenses necessary for the collection of your delinquent account.

Questions should be directed to the Business Office at 717-815-1470.

Printed Name

Signature

Date

Phone Number