IP FEE DEFERMENT FORM
For FSU Students on Spring 2017 Programs

Before submitting a fee deferment form, you should UNDERSTAND the following:

• The attached fee deferment form is to be completed ONLY by students who expect to qualify for and receive financial aid.

• It is imperative that you read and understand the IP fee liability and refund policy: http://www.international.fsu.edu/Students/Admitted/Refund.aspx

• When in doubt, don’t fill it out! You should not submit a fee deferment form if failure to receive your anticipated aid would prevent you from being able to afford the program.

• If you receive less aid than what you indicated on your form, you MUST pay the balance out of pocket.

• If you are relying on others for funding (i.e. Parent Plus loans, gifts, private loans), we strongly encourage you to discuss this form with them before submitting it.

• If you have any questions related to the fee deferment form, meet with the IP Financial Aid Advisor before you submit a fee deferment form.

• By completing this form you will be held liable for the confirmation deposit and/or full program fee unless you cancel from your program before the published payment deadlines.

• In accordance with the fee liability policy, cancellations must be submitted in writing: administrative.cancellation@admin.fsu.edu

• The deferment form is a legally binding financial document, so please read carefully.

We mean “go away” in the most positive way! Now that you understand the nature of the deferment form, we hope you still plan to study abroad with International Programs. Please feel free to contact our office with any questions, or complete and submit the attached deferment form.
I, ___________________________ EMPLID ________________ Program Code _________________
(print name)

have applied for and expect to be approved for financial aid through Florida State University. **Waivers cannot be used as a method of deferment or payment.** I expect to receive the following amount(s) of aid through the following source(s):

<table>
<thead>
<tr>
<th>Sources of Financial Aid</th>
<th>Dollar Amount of Expected Aid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants</td>
<td></td>
</tr>
<tr>
<td>Do you anticipate receiving Veteran’s Affairs (VA) funding?</td>
<td>Yes   No</td>
</tr>
<tr>
<td>Scholarships (Honors, Incentive, etc.)</td>
<td></td>
</tr>
<tr>
<td>Loans (Stafford, PLUS or Private)</td>
<td></td>
</tr>
<tr>
<td>Florida Pre-Paid*: Circle FPP plan(s) that you have:</td>
<td></td>
</tr>
<tr>
<td>Tuition</td>
<td>$115.08/credit</td>
</tr>
<tr>
<td>Housing</td>
<td>$3240.00/term</td>
</tr>
<tr>
<td>Local Fees</td>
<td>$34.73/credit</td>
</tr>
</tbody>
</table>

Indicate number of credits to be taken overseas: _______

*Summer housing requires authorization through Florida Prepaid; account holder must submit letter to Florida Prepaid

<table>
<thead>
<tr>
<th>Total Amount of Expected Financial Aid</th>
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I hereby request that fees owed to FSU International Programs for my participation in the ____________________ program be deferred, to the extent of my total expected aid indicated above, until my financial aid funds are received, but no later than **February 15, 2017**. I understand that the amount of my deferred fees will be deducted from any financial aid monies I am to receive through FSU’s Student Financial Services before any remaining monies will be released to me. *I understand that it is my responsibility to monitor my financial aid file and to ensure that all necessary paperwork has been completed. I understand that it is my responsibility to settle all fees owed to FSU International Programs in the time agreed upon; failure to settle all outstanding fees to FSU International Programs may be subject to collection through a third party provider.*

I agree that if for any reason I do not receive financial aid funds sufficient to cover my program fees or if my aid is not disbursed to FSU International Programs by February 15, 2017, failure to settle all outstanding fees to FSU International Programs may be subject to collection through a third party provider; furthermore, the student may be asked to depart from the program prior to the conclusion of the program. I agree that I have read and understand the FSU International Programs fee liability and refund policy (www.international.fsu.edu/Students/Refund.aspx). *I understand in accordance with the fee liability policy, cancellations must be submitted in writing: administrative.cancellation@admin.fsu.edu. I agree that if I withdraw from the program after September 21, 2016, but on or before October 19, 2016, regardless of the date of my application and acceptance, I am liable for the $1500.00 confirmation deposit. I further agree that if I withdraw from the program after October 19, 2016, regardless of the date of my application and acceptance, I am liable for the full program fee.*

I have read and I understand the financial provisions set forth herein and have freely and voluntarily signed in agreement therewith.

Applicant Signature ______________________________________ Date ________________________________
(sign in the presence of a notary)

**Note:** In order for the deferment to be processed, applicants should only sign in the presence of a notary.

*State of _________________________________ County of _________________________________ _________________________________

Sworn to and subscribed before me this _____ day of ________, 20____, by ________________________________

(name of applicant)

Signature of Notary _________________________________ Printed Name of Notary _________________________________

Personally Known _____ or Produced Identification ___________________________ Type of ID Produced ___________________________