

Fort Hays State University Student Fiscal Services

600 Park Street 317 Picken Hall Hays, KS 67601 P 785.628.5251 F 785.628.4081 sfsmail@fhsu.edu www.fhsu.edu/sfs

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Fort Hays State University Financial Responsibility Agreement

PAYMENT OF FEES/PROMISE TO PAY

I understand that when I register for any class at Fort Hays State University (hereinafter referred to as FHSU) or receive any service from FHSU, I accept full responsibility to pay all tuition, fees, and other associated costs assessed as a result of my registration/enrollment and/or receipt of services. I further understand and agree that my registration/enrollment and acceptance of these terms constitutes a promissory note agreement (i.e., a financial obligation in the form of an educational loan as defined by the U.S. Bankruptcy Code at 11 U.S.C. §523(a)(8)) in which FHSU is providing me educational services, deferring some or all of my payment obligation for those services, and I promise to pay for all assessed tuition, fees, and other associated costs by the published or assigned due date.

I understand and agree that if I drop or withdraw from some or all of the classes for which I register, I will be responsible for paying all or a portion of tuition and fees in accordance with the published tuition refund schedule at https://www.fhsu.edu/registrar/Semester-Course-Drop-and-Withdrawal-Policy/. I have read the terms and conditions of the published tuition refund schedule and understand those terms are incorporated herein by reference. I further understand that my failure to attend class or receive a bill does not absolve me of my financial responsibility as described above. Furthermore, I understand that failure to attend class or meet payment deadlines does not automatically withdraw me from classes.

I understand that published tuition and fees are subject to change by the Kansas Board of Regents and any changes in my classification, residency, or other status issues may change the amount of fees owed or financial aid received, if applicable. I further understand that FHSU reserves the right to cancel my registration/enrollment at any time. Additionally, I understand that I must comply with all current FHSU policies and procedures, including but not limited to those located at http://www.fhsu.edu/policies/.

FINANCIAL AID TERMS AND CONDITIONS

I understand that aid described as "estimated" or "anticipated" on my Financial Aid Award does not represent actual or guaranteed payment, but is an estimate of the aid I may receive if I meet all requirements stipulated by that aid program.

As of January 29, 2024

I understand that my Financial Aid Award is contingent upon my continued registration/enrollment and attendance in each class upon which my financial aid eligibility was calculated. If I drop any class before completion, I understand that my financial aid eligibility may decrease and some or all of the financial aid awarded to me may be revoked.

If some or all of my financial aid is revoked because I dropped or failed to attend class, I agree to repay all revoked aid that was disbursed to my account and resulted in a credit balance that was refunded to me.

I agree to allow financial aid I receive to pay any and all charges assessed to my account at FHSU such as tuition, fees, campus housing and meal plans, and any other educational charges, in accordance with the terms of the aid.

Federal Aid: I understand that any federal Title IV financial aid that I receive, except for Federal Work Study wages, will be applied first to any outstanding balance on my account for tuition, fees, campus housing and meal plans, and any other educational charges. Federal Title IV financial aid includes aid from the Pell Grant, Supplemental Educational Opportunity Grant (SEOG), Direct Loan, PLUS Loan, and TEACH Grant programs.

Prizes, Awards, Scholarships, Grants: I understand that all prizes, awards, scholarships, and grants awarded to me will be credited to my student account and applied toward any outstanding balance. I further understand that my receipt of a prize, award, scholarship, or grant may be considered a financial resource according to federal Title IV financial aid regulations, and may therefore reduce my eligibility for other federal and/or state financial aid (i.e., loans, grants, Federal Work Study) which, if already disbursed to my student account, may be reversed and returned to the aid source.

I understand that completion of this financial responsibility agreement signifies my acknowledgement of receipt of the Financial Assistance Office <u>terms and conditions</u>. For questions or clarification on these conditions, please contact the Financial Assistance Office at finaid@fhsu.edu.

COMMUNICATION

Method of Communication: I understand and agree that FHSU uses email and Workday as the official methods of communication with me, and that therefore I am responsible for reading the emails and notifications I receive from FHSU on a timely basis. I further understand that FHSU Student Fiscal Services sends all email communications to my FHSU Mail account.

Contact: I authorize FHSU and its agents and contractors to contact me at my current and any future cellular phone number(s), email address(es), or wireless device(s) regarding my delinquent student account(s)/loan(s), any other debt I owe to FHSU, or to receive general information from FHSU. I authorize FHSU and its agents and contractors to use automated telephone dialing equipment, artificial or pre-recorded voice or text messages, and personal calls and emails, in their efforts to contact me. Furthermore, I understand that I may withdraw my consent to call my cellular phone by submitting my

request in writing to FHSU Student Fiscal Services or in writing to the applicable contractor or agent contacting me on behalf of FHSU.

Updating Contact Information: I understand and agree that I am responsible for keeping FHSU records up to date with my current physical addresses, email addresses, and phone numbers in Workday. Upon leaving FHSU for any reason, it is my responsibility to provide FHSU with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to FHSU.

METHOD OF BILLING

I understand that FHSU uses electronic notification (via email) as its official billing method, and therefore I am responsible for viewing and paying my student account by the scheduled due date. I further understand that failure to review my account does not constitute a valid reason for not paying my bill on time. I agree to regularly monitor my account through my Workday student portal, view any outstanding charges, and make payment before the assigned due date. Additionally, I understand that FHSU Student Fiscal Services reserves the right to contact me via mail or telephone, if necessary. Billing information is available at https://www.fhsu.edu/sfs/.

BILLING ERRORS

I understand that administrative, clerical, or technical billing errors do not absolve me of my financial responsibility to pay the correct amount of tuition, fees, and other associated financial obligations assessed as a result of my registration/enrollment at FHSU.

RETURNED PAYMENTS/FAILED PAYMENT AGREEMENTS

If a payment made to my student account is returned for any reason, I agree to repay the original amount of the payment plus a returned payment fee of \$30.00. I understand that multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I register in with FHSU may result in cancellation of my classes, suspension of my eligibility to register in future classes at FHSU, and/or suspension of my eligibility to utilize payment plans in the future.

DELINQUENT ACCOUNT/COLLECTION

Financial Hold: I understand and agree that if I fail to pay any outstanding charges due to FHSU by the scheduled due date, FHSU Student Fiscal Services will place a financial hold on my student account, preventing me from registering in future classes, requesting transcripts, or receiving other FHSU services.

Late Payment Charge: I understand and agree that if I fail to pay any outstanding charges due to FHSU by the scheduled due date, FHSU Student Fiscal Services may assess a late fee at the rate of \$25.00 per month on the past due portion of my student account until my past due account is paid in full.

Collection Agency Fees: I understand and accept that if I fail to pay any outstanding charges due to FHSU by the scheduled due date, and fail to make acceptable payment arrangements to bring my

account current, FHSU Student Fiscal Services may refer my delinquent account to a collection agency. I further understand that I am responsible for paying the collection agency fee which may be based on a percentage of my delinquent account, together with all costs and expenses, including reasonable attorney's fees, necessary for the collection of my delinquent account. Additionally, I understand that my delinquent account may be reported to the Kansas Setoff Program, Kansas Treasury Offset Program, and one or more of the national credit bureaus.

WITHDRAWAL

If I decide to completely withdraw from FHSU, I will follow the instructions at http://www.fhsu.edu/registrar/changes-to-class-schedule/ which I understand and agree are incorporated herein by reference.

PRIVACY RIGHTS & RESPONSIBILITIES

I understand that FHSU is bound by the <u>Family Educational Rights and Privacy Act (FERPA)</u> which generally prohibits FHSU from releasing information from my education record without my expressed permission. Therefore, I understand that if I want FHSU to share information from my education record with someone else, I must provide permission by following the Friends & Family Third Party Permissions process in Workday. I further understand that I may revoke my permission at any time as instructed in the same process.

IRS FORM 1098-T

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to FHSU upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to provide my SSN or TIN to FHSU, I agree to pay any and all IRS fines assessed as a result of my missing SSN/TIN.

STUDENT AGE

I understand and agree that if I am younger than the applicable age of majority when I execute this agreement that the educational services provided by FHSU are a necessity, and I am contractually obligated pursuant to the "doctrine of necessaries."

ENTIRE AGREEMENT

This agreement supersedes all prior understandings, representations, negotiations, and correspondence between the student and FHSU, constitutes the entire agreement between the parties with respect to the matters described, and shall not be modified or affected by any course of dealing or course of performance. This agreement may be modified by FHSU if the modification is signed by me. Any modification is specifically limited to those policies and/or terms addressed in the modification. This agreement shall be construed in accordance with Kansas law and any lawsuit arising out of this agreement is subject to the exclusive jurisdiction of the Ellis County District Court in Hays, Kansas.