

FALL 2014

REGIS PAYMENT OPTION

for Rueckert-Hartman
College for Health Professions

THE REGIS PAYMENT OPTION (RPO) is an interest-free monthly payment plan for students registered for semester-based courses. It spreads tuition and fees over four, five or six month payments. A plan is established when we receive a completed, signed application form with first payment, or authorization to charge your credit card. A \$50 non-refundable fee is due with your first payment.



MONTHLY PAYMENT OPTIONS

AUTOMATIC: Fill out your information and check the "Yes" box after "Automatic Monthly Credit Card Deduction."

ONLINE: Pay monthly through WebAdvisor. Log on, click on "Students," select "Make A Payment," and choose "Pay On My Regis Payment Option."

MAIL OR FAX: Use the statement you received in the mail and fax your payment information to 303-964-5407, or mail checks to the address provided. Regis does not accept post-dated checks. Payments must be made in U.S. funds.

FALL PAYMENT SCHEDULE

6 PAYMENTS: JULY - DECEMBER

5 PAYMENTS: JULY - NOVEMBER

4 PAYMENTS: AUGUST - NOVEMBER

Payments are due the first day of the month.
A separate application must be submitted for each semester.

2014-15 FEES & CHARGES SCHEDULE

Per semester unless otherwise indicated. Subject to change without notice.

TUITION AND FEES

Full-time tuition (12-18 hours)	\$16,920
Part-time tuition (per credit)	\$1,060
Student Activity Fee	\$150
Student Support Fee	\$150
Health Insurance*	\$1,102
Nursing Laboratory Fee	\$200
Orientation Fee (new students)	\$200
Commitment Program	\$1,250
Late Payment Fee	\$300
Late RPO Fee (per month)	\$15
RPO Set-Up Fee	\$50

RESIDENCE HALLS

Residence Village Double	\$2,960
Residence Village Single	\$3,900
Ignatian Village Double	\$2,835
Ignatian Village Single	\$3,315
West Hall/DeSmet/O'Connell Double	\$2,600
West Hall/DeSmet/O'Connell Single	\$3,450

MEALS

Plan A with \$300 Flex	\$2,252
Plan B with \$400 Flex	\$2,150
Plan C with \$500 Flex	\$1,510
Plan D with \$75 Flex	\$315

*To waive health insurance prior to submitting your RPO application, please go to AetnaStudentHealth.com

QUESTIONS?

Student Accounts Office
3333 Regis Blvd., A-8
Denver, CO 80221-1099

303-458-4126/1-800-568-8932
Fax: 303-964-5407
Regis.edu/StudentAccounts

Residence Life: 303-458-4991
Student Life: 303-458-4086
Student Health Services:
303-458-3558

STEPS TO ENROLL

- » Using the Fees & Charges Schedule and the Budget Worksheet, list your expenses.
- » Enter your semester deductions. Use any confirmed financial aid awards, excluding Work Study. Do not include 'Estimated' or 'Recommended' financial aid awards. Subtract any loan origination fees withheld by your lender.
- » Subtract your total deductions from your total expenses and enter the amount on the Balance Due line.
- » Enter the number of monthly payments for your plan and calculate your monthly payment.
- » Sign the RPO Application. All students must sign regardless of age.

MAIL THE APPLICATION, FEE AND MONTHLY PAYMENT(S) DUE TO:

Regis Payment Option
Regis University
3333 Regis Blvd., A-8
Denver CO 80221-1099

If you are paying by credit card or online, fax the application to 303-964-5407 to expedite your application and payment.

BUDGET WORKSHEET

CHARGES (per semester):

Tuition	\$ _____
Student Activity Fee	\$ _____
Student Support Fee	\$ _____
Orientation Fee	\$ _____
Commitment Fee	\$ _____
Insurance	\$ _____
Nursing Lab Fee	\$ _____
Room Plan	\$ _____
Meal Plan	\$ _____
Other Fee(s)	\$ _____
TOTAL EXPENSES	\$ _____

DEDUCTIONS

Confirmed Financial Aid	\$ _____
Deposits Paid	\$ _____
Other Payments	\$ _____
TOTAL DEDUCTIONS	\$ _____

BALANCE DUE

_____ / _____ = \$ _____

Balance due / Divided by # of payments = Your monthly payment

Application Fee + \$50

TOTAL DUE WITH APPLICATION \$ _____

All payments are due on the first of the month.

My signature acknowledges that I have read and agree to the RPO terms and conditions and that I agree with the payments listed in this plan, including necessary future adjustments. By signing this agreement it is understood that any and all changes to my student account (such as additional fees, room assignment changes, meal plan changes, calculation corrections, etc.) will be reflected in a payment schedule increase or decrease for subsequent monthly payments. The revised payment schedule will be effective immediately from the date any adjustment occurs. I understand that if payment is not received by the plan is in default. The release of my transcripts and diploma will also be restricted until my financial obligation with Regis University is paid in full. Late fees will be assessed monthly on defaulted plans. Checks returned for insufficient funds will incur additional penalty fees.

I authorize Regis University and their respective agents and contractors to contact me regarding my student account, including repayment of my student account, at the current or any future phone number that I provide including my cellular phone or other wireless device using automated telephone dialing equipment or artificial or pre-recorded voice or text messages.

I understand that failure to pay the RPO payment plan and fees will result in my account being sent to external collection agencies. I further understand that upon non-payment of this agreement as stated, Regis University may declare the balance due and payable. I agree to reimburse Regis University the fees of any collection agency up to 30% which may not be reflected in the statement of account, which may be based on a percentage of the debt, and all the costs and expenses, including late fees and all other applicable charges to Regis University. In the event this agreement is placed in the hands of an attorney for collection through legal proceedings or otherwise, I agree to pay late fees, attorney fees, court costs, and all other applicable charges to Regis University. I understand that this signed RPO payment plan is equal to a loan and is not dischargeable in bankruptcy. This agreement shall be governed by Colorado law, excluding its conflicts of law's provisions. Should I default, Regis University and its respective agents reserve the right to report defaulted information to the credit bureaus.

I acknowledge that I have read and understand this agreement and agree to the terms herein set forth.

Student's Signature (required) Date

Parent's Signature (required only if student is under 18 years of age) Failure to provide signature will result in delay of processing RPO. Date

REGIS PAYMENT OPTION (RPO) APPLICATION - FALL 2014

Student Name _____

Student ID # _____

Billing Address _____

Daytime Phone _____

Evening Phone _____

Email _____

6 PAYMENTS 5 PAYMENTS 4 PAYMENTS

CHECK # _____

Check Amount \$ _____

CREDIT CARD:

MasterCard Visa American Express Discover

Automatic Monthly Credit Card Deduction? Yes No

If neither box is checked, Automatic Monthly Deductions will be applied.

Name of Account Holder _____

Card Holder Address _____

Credit Card Number _____

Exp. Date _____ CSV# _____

Card Holder Signature _____

Please call to update your credit card information if it changes during the semester.