### **Regis Payment Option - Rueckert Hartman College for Health Professions**

#### MONTHLY PAYMENT OPTIONS

- 1. **Automatic**: To use the automatic credit card deduction, fill out the information on the following page and check the **Yes** box after *Automatic Monthly Credit Card Deduction*.
- 2. **Online:** Monthly payments can be made through WebAdvisor.
- Log into WebAdvisor
- Click on Students
- Select Make A Payment
- Select Pay On My Regis Payment Option.
- 3. Mail or Fax: Use the statement you received in the mail and fax your payment information to 303-964-5449 or mail checks to the address provided. Regis does not accept post-dated checks. Payments must be made in U.S. funds.

Late payments and returned checks: Upon acceptance into the plan, you will receive a statement with payment amounts and due dates. Loss or delayed receipt of the statement does not relieve the obligation to pay on

#### **Spring Tuition Due Date - January 1**

**RPO Application Due Dates** 5-month payment plan - December 1 4-month payment plan - January 1

A separate RPO application needs to be submitted for each semester.

time. If you do not receive an itemized statement as scheduled, call 303-458-4126 or 1-800-568-8932. There is a \$31 charge for checks returned for insufficient funds.

Plan Default: If payment is not received by the plan due date, the account will be considered in default. Future registration is restricted until any past due financial obligation is paid. If this agreement remains in default, it may be referred to a collection agency. All collection costs and fees are to be paid by the student, including attorney fees, court costs, and any other related costs. Students may view their current statement and amount due by logging into WebAdvisor (see Online payments).

**Transcripts/Registration:** Release of transcript/diploma is restricted until the entire plan amount and student account balance are paid in full.

# 2012-2013 Fees & Charges Schedule (per semester unless otherwise indicated and subject to change without notice)

| Tuition and Fees                |           | Room and Meal Plan Charges        |          |
|---------------------------------|-----------|-----------------------------------|----------|
| Full-time Tuition (12-18 hours) | \$ 15,906 | Residence Halls                   |          |
| Part-time Tuition (per credit)  | \$ 994    | Residence Village Double          | \$ 2,960 |
| Student Activity Fee            | \$ 150    | Residence Village Single          | \$ 3,900 |
| Student Support Fee             | \$ 150    | Ignatian Village Double           | \$ 2,750 |
| Nursing Laboratory Fee          | \$ 200    | Ignatian Village Single           | \$ 3,100 |
|                                 |           | West Hall/DeSmet/O'Connell Double | \$ 2,600 |
|                                 |           | West Hall/DeSmet/O'Connell Single | \$ 3,448 |
| Orientation Fee (new students)  | \$ 200    |                                   |          |
| Commitment Program              | \$ 1,250  | Meals                             |          |
| * Health Insurance              | \$ 1,267  | Plan A                            | \$ 2,165 |
|                                 |           | Plan B                            | \$ 2,010 |
| Late Payment Fee                | \$ 100    | Plan C                            | \$ 1,025 |
| Late RPO Fee (per month)        | \$ 15     | Plan D                            | \$ 299   |
| RPO Set-up Fee                  | \$ 50     |                                   |          |

<sup>\*</sup> To waive health insurance, go to www.aetnastudenthealth.com.

## **REGIS PAYMENT OPTION (RPO) APPLICATION Spring 2013 - RHCHP**

| Student Name   |   | Student  | ID#                                  |  |
|--|---|--|--------------------------------------|--|
| Billing AddressStreet  | City  |  |                                      |  |
| Street   | City  | State  | Zip Code                             |  |
| Daytime Phone  | Evening Phone   |  | E-Mail                               |  |
| Spring Payment Schedule:   | Credit Card: ☐ Master Card ☐ Visa ☐ American Express ☐ Discover  Name of Cardholder |  |                                      |  |
| □ 5 payments: December – April □ 4 payments: January – April   | Cardholder Address  |  |                                      |  |
| Payments are due the first day of  | Credit Card Number  | Credit Card Number Expiration Date                                     |                                      |  |
| the month.   | CSV Code  |  |                                      |  |
| A SEPARATE APPLICATION   | Cardholder Signature  | 2  |                                      |  |
| MUST BE SUBMITTED FOR EACH SEMESTER.   | Checking Account #         Routing #  |  | iting #                              |  |
| EACH SEMESTER.   | Account Holder Signature  |  |                                      |  |
|  | Automatic Monthly Credit Card or Bank Account Deduction? ☐ Yes ☐ No                 |  |                                      |  |
|  |   | ox is selected, Automatic Monthly                                      |                                      |  |
| PPO F 11   |   |  | t Worksheet                          |  |
| RPO Enrollmer Please complete the following sto  |   |  | t Worksheet                          |  |
| Regis Payment Op   |   | EXPENSES (per semester): Tuition                                       | d                                    |  |
|  |   | Student Activity Fee   | \$<br>\$                             |  |
| 1. On the Budget Worksheet, list you   | semester expenses   | Student Support Fee  | \$                                   |  |
| based on the 2012-2013 Fees & Charges Schedule.  2. Enter your semester deductions. Use any "Guaranteed" financial aid awards provided in your Award Response Form (ARF), excluding Work Study. Please do not include "Estimated" or "Recommended" financial aid awards in this calculation. Be sure to subtract any loan origination fees withheld by your lender.  3. Subtract your Total Deductions from your Total Expenses and enter the amount on the Balance Due line.  4. Enter the number of monthly payments for your plan (4 or 5 each semester), and calculate your monthly payment.  5. Sign the RPO Application. (All students must sign regardless of age.) Mail the application, fee and monthly |   | Nursing Lab Fee  | \$                                   |  |
|  |   | Orientation Fee  | \$                                   |  |
|  |   | Commitment Fee   | \$                                   |  |
|  |   | Insurance  | \$                                   |  |
|  |   | Room Plan  | \$                                   |  |
|  |   | Meal Plan  | \$                                   |  |
|  |   | Other Fee(s)   | \$                                   |  |
|  |   | Total Expenses   | \$                                   |  |
|  |   | DEDUCTIONS:  | di .                                 |  |
|  |   | Confirmed Financial Aid (after deducting origination and default fees) | \$                                   |  |
|  |   | Deposits Paid  | \$                                   |  |
| payment(s) due to: Regis Payment   |   | Other Payments   | \$                                   |  |
| University, 3333 Regis Blvd., A-8, Denver, CO 80221-1099. If you are paying by credit card or online, you may fax this application to 303-964-5449 to expedite your RPO application and payment.   |   | Total Deductions   | \$                                   |  |
|  |   | BALANCE DUE  | \$                                   |  |
| For information about room plans, co   |   |  | = \$                                 |  |
| at 303-458-4991. For information about meal plans, contact Student Life at 303-458-4086. For information about health insurance, contact Student Health Services at 303-458-3558. To waive health insurance prior to submitting your RPO application, please go to www.aetnastudenthealth.com.   |   | Balance Due divided by # of pa   | - ' <u></u>                          |  |
|  |   | , ,  | Tour monthly payment                 |  |
|  |   | Application Fee  | + \$50.00                            |  |
|  |   | TOTAL DUE WITH APPLICA   | ATION                                |  |
|  |   | \$ All payments are due on the   | first of the month.                  |  |
| My signature below acknowledges that I including necessary adjustments. By signal fees, room assignment change, meal payments will be effective immediately f  | ning this agreement it is und<br>plan, calculation corrections,                     | erstood that any and all changes to                                    | my student account (such as addition |  |
| udent's Signature (required)   |   | Date   |                                      |  |
| · · · · · · · · · · · · · · · · · · ·  |   |  |                                      |  |
| rent's Signature (Required only if the ab  | ove student is under 18 vears   | of age) Date   |                                      |  |