



STUDENT FINANCIAL RESPONSIBILITY AGREEMENT



As part of the registration process, all students must agree to and sign a copy of the Financial Responsibility Agreement. The Financial Responsibility Agreement is an acknowledgement of debt that is incurred when conducting registration activity. Regardless of how or when a student becomes registered for coursework, it is understood they will agree to the financial terms and conditions found here.

STATEMENT OF FINANCIAL RESPONSIBILITY AND DISCLOSURE STATEMENT

This Agreement states the terms and conditions regarding your Southwest Florida Public Service Academy (hereinafter, “SWFPSA”) student account and is designed to help you to understand the commitment that you are making in the payment of your tuition and fees during your terms of enrollment at SWFPSA. The words “you” and “yours” mean each of those signing this Agreement. “We”, “us” and “our” mean SWFPSA and its official agents.

PAYMENT OF FEES/PROMISE TO PAY

I understand when registering for any class or receiving any service from SWFPSA, I accept full responsibility to pay all tuition, fees, and other associated costs assessed.

I understand my registration and acceptance of the terms of this Financial Responsibility Agreement 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 SWFPSA 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 in full by the published or assigned due date each payment period.

I understand if any payment made to my student account is returned to SWFPSA for any reason, I will repay the original amount of the payment plus a returned payment fee.

ADJUSTMENTS TO FINANCIAL AID

Any balance due to SWFPSA as a result of adjustments made to your estimated or confirmed financial aid or your refusal to apply for any or all of your financial aid, or your inability to complete the financial aid verification process become your responsibility for payment. You agree to supply the Financial Aid Office with any reasonable information or documents that they may request to complete the verification process within the time requested.

FINANCIAL AID

FAFSA: I understand to apply for financial aid I must complete the Free Application for Federal Student Aid (FAFSA) annually. This form is available online at www.fafsa.gov.

Financial Aid Award: I understand that aid described as “anticipated” on my Financial Aid Anticipated Notification 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.

I understand that my Financial Aid Anticipated Notification is contingent upon my continued enrollment and attendance in the program upon which my financial aid eligibility was calculated. If I drop or withdraw from 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. I also understand that my Financial Aid Anticipated Notification may decrease as a result of program funding level decreases at the Federal and State level.

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

METHOD OF BILLING

I understand that SWFPSA uses electronic billing as its official billing method, and therefore I am responsible for viewing my bill in the Focus Student Portal and paying my bill via the portal or in person at the Bursar’s Office on campus by the scheduled due date. I further understand that failure to review my bill does not constitute a valid reason for not paying my bill on time.

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 at SWFPSA.

WITHDRAWAL

I understand if I drop or withdraw from some or all of my registered program, including administrative withdrawal, I will be responsible for paying all or a portion of tuition, fees and other associated costs in accordance with the published tuition refund schedule located in the SWFPSA Handbook posted on the SWFPSA website (www.swfpsa.org).

I understand my failure to pay for tuition, fees and other associated costs past the deadline date or failure to receive financial aid does not automatically withdraw me from my classes at SWFPSA and does not cancel my student account. I am responsible for all balances owed to the college.

DELINQUENT ACCOUNT/COLLECTION

I understand if I have an outstanding balance due to SWFPSA, a financial hold will be placed on my student account, and I will be unable to register for classes, obtain a transcript or receive my diploma or certificates.

I understand if my student account balance is not paid in full by the scheduled payment period due date, the outstanding balance remaining unpaid may be assessed up to a 35% collection fee and reported to appropriate collection agencies.

COMMUNICATION

I understand email is the official method of communication with students, and I am responsible for reading the emails I receive on a timely basis. Actions and charges that result from failure to pay charges on time or to respond to a message from the Bursar regarding my student account are my responsibility. If email communication is deemed unsuccessful or the information communicated is of high importance or urgency, other methods of communication may be used.

I understand my agreement to this Financial Responsibility Agreement authorizes SWFPSA to utilize any and all physical addresses, electronic addresses, and phone numbers when attempting to contact me in regards to financial information. I also agree SWFPSA may disclose all my contact information, along with other relevant information, to any outside collection agency used for the collection of my outstanding balance.

I understand if a sponsor is paying my student account balance, SWFPSA will release account information directly to the sponsor.

I understand that I am responsible for keeping my SWFPSA Student Portal record up to date with my current physical address(es), email address(es), and phone numbers. Upon leaving SWFPSA for any reason, it is my responsibility to provide updated contact information for purposes of continued communication regarding any amounts that remain due to SWFPSA.

IRS FORM 1098-T

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to SWFPSA upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to do so, 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 age of majority when I execute this agreement that the educational services provided by SWFPSA are a necessity, and I am contractually obligated pursuant to the “doctrine of necessities.”

ENTIRE AGREEMENT

This agreement supersedes all prior understandings, representations, negotiations and correspondence between the student and SWFPSA, 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 SWFPSA if the modification is signed by me. Any modification is specifically limited to those policies and/or terms addressed in the modification.

I agree to the terms and conditions of this agreement, as well as those contained in the official policies of SWFPSA as published in the most recent edition of the Student Handbook as condition of my enrollment as a student at SWFPSA. I acknowledge that I have read this agreement.

GOVERNING LAW

I understand that this agreement is governed under the laws of the State of Florida.

Student Signature

Student ID Number

Student Name (Printed)

Date