



Rhodes State College Reimbursement and Tuition Deferment Information

Welcome to Rhodes State College. Thank you for choosing Rhodes State College to provide your educational needs. If we can be of any assistance, please give us a call. This information sheet for the Corporate Reimbursement and Tuition Deferment form is designed to help explain payment options available.

Payment Options:

① **Pay for all fees upon registration.**

1. Payment can be made by cash, check, VISA, MasterCard or Discover.
2. Make checks payable to Rhodes State College.

② **Defer Payment**

The Business Office must receive a completed form with an authorized signature and the \$25 payment, due each quarter by the scheduled fee due date. Tuition and fees will be due 30 days after the end of the quarter. A late fee of \$20 will be charged on all outstanding balances after 30 days.

③ **Direct Billing**

Rhodes State College can bill your employer directly for tuition and fees. Indicate company name and address for billing purposes. A completed form with an authorized signature is required. The direct billing to your employer will be payable upon receipt.

Refunds

See refund policy in the catalog.

Rhodes Web Address:

www.rhodesstate.edu

For More Information

The following telephone number, office hours and email addresses are provided for your convenience.

Business Office419-995-8088
 419-995-8473
 419-995-8099 (FAX)
 8:00 a.m. to 5:00 p.m. Monday through Friday
schnipke.c@rhodesstate.edu
fox.j@rhodesstate.edu

Follett Bookstore419-995-8243
 419-995-8083 (FAX)
 8:00 a.m. to 5:00 p.m. Monday through Friday
0220mgr@fhcg.follett.com



Corporate Reimbursement and Tuition Deferment Form

Rhodes State College
 Business Office
 4240 Campus Drive, Lima, Ohio 45804
 (419) 995-8473
 Fax: (419) 995-8099

Present Date: (Mo.) (Day) (Year) Fall Winter Spring Summer Year _____

Name: (Last) (First) (Middle) (Maiden/Previous Name)

I.D. #: R _____

Home/Cell Phone: (Area Code) (Number)

Home Address: (No.) (Street) (City) (State) (Zip) (County) (Country of Citizenship)

Place of Employment: Business Phone: (Area Code) (Number)

Business Address: (Street) (City) (State) (Zip)

Courses for which you will be seeking reimbursement: (Note: This is **not** your registration form, only verification of courses for use by your employer.)

CRN	Course No.	Section	Day/Time	Course Title	Tuition/Fees

Registration Fee (every qtr.)	\$25.00
Book Charges	
TOTAL	

- Corporate Reimbursement/Deferment Option (See below). There is a \$25 fee to defer your tuition with this option.**
 If you are eligible for tuition reimbursement benefits from your employer, you can defer your tuition and fees until 30 days after the quarter of registration. (Requires authorized signature below.) I understand that if I do not meet the Corporation Reimbursement requirements that I am responsible for payment of fees.
- Third party billing Company responsible: _____ (Requires authorized signature)

All fees or fee payment arrangements (to include corporate deferment option) are due by the published deadlines in the current quarter schedule.

Student's Signature _____ Date _____

CORPORATE REIMBURSEMENT OPTION/THIRD PARTY PAYMENT OPTION

This section must be completed with each registration form. Failure to properly complete this form waives all rights to Corporate Reimbursement deferment. A late fee of \$20 will be charged on all outstanding balances due 30 days after course completion. Rhodes State College is not responsible to release grades or registration information to any third parties.

Employee (Student) Name _____ Include Books Yes No

Is this employee eligible for corporate reimbursement? Yes No

Corporate reimbursement is: (Check those that apply)
 Full Reimbursement (Tuition & Fees) _____
 Partial Reimbursement Designated amount \$ _____
 Contingent on Final Grade Designated % _____

 Authorized Signature (Corporation) Title Date