

# LINCOLN CHRISTIAN UNIVERSITY

## Payment Plan Agreement - Hargrove School of Adult & Graduate Studies

**Name:** \_\_\_\_\_  
Last First M.I.

**ID Number:** \_\_\_\_\_

**Billing Information** (please provide the address to which you would like any billing notices sent):

**Address:** \_\_\_\_\_  
 \_\_\_\_\_  
**Email** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Step 1 - CALCULATE YOUR BALANCE DUE:**

Please use the Billing Ledger from your Web/Student Portal menu to calculate your balance due. Feel free to contact the Accounting Office if you have questions about the amount due for the upcoming semester.

Enter the Total Semester Charges	\$ _____	X 2(Annual)	\$ _____
Subtract Financial Aid Award			\$ ( _____ )
Subtract Down Payment			\$ ( _____ )
Equals the Balance Due			\$ _____

**Step 2 - ELECT A PAYMENT PLAN:**

Please complete step 4 below indicating your agreement to the terms and conditions of this program. Also, please complete your payment calculation, dividing by the appropriate number of months.

Calculated Balance Due (from Step 1)	\$ _____
Add Payment Plan Enrollment Fee	\$ _____ 50.00
Total Balance Due	\$ _____
Circle Plan Electing and Calculate Payment	

FOR OFFICE USE ONLY			
Aug	\$ _____	Feb	\$ _____
Sept	\$ _____	Mar	\$ _____
Oct	\$ _____	Apr	\$ _____
Nov	\$ _____	May	\$ _____
Dec	\$ _____	Jun	\$ _____
Jan	\$ _____	Jul	\$ _____

**12 Payments** Divide Total by 12 = Monthly Payment (**2 Semesters**) \$ \_\_\_\_\_

**6 Payments** Divide Total by 6 = Monthly Payment (**1 Semester**) \$ \_\_\_\_\_

**3 Payments** Divide Total by 3 = Monthly Payment (**Mid-semester**) \_\_\_\_\_

**Step 3 - BANK OR CREDIT CARD DATA:**

I hereby authorize Lincoln Christian University to obtain my tuition payment from my bank account or credit card using the below information:

Credit Card Number _____	Exp. Date _____ / _____
or	
Bank Routing Number _____	Account # _____
Name on Credit Card/Bank Account _____	
<b>Circle one: Savings      Checking</b>	
Credit Card/Bank Account Holder Address _____	
Signature _____	Date _____ / _____ / _____

**Step 4 - LCU PAYMENT PLAN AGREEMENT TERMS (PPA) AND CONDITIONS:**

PPA participants are charged a fee of \$50 to enroll in the payment plan; this charged is figured into the payment agreement. Payments will be automatically charged to your credit card or withdrawn from your bank account on the 15th of each month. A \$25 LATE FEE is charged for any payments received more than 5 days late. Loans or other financial aid received to the student's account must be applied directly to the outstanding balance. If these funds cover the balance in full, this payment plan will no longer be in effect. Any future adjustments to the student's account, such as tuition and/or financial aid increase or decrease or fines are the responsibility of the PPA participant. These charges will be reflected on the student's billing ledger accessible by the student in the STUDENT PORTAL. In addition, any student with a balance that is not paid in full will not be able to register for the next semester. Please contact 217-732-3168 x2221 with any questions.

**Signature:** \_\_\_\_\_

**Date** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Please mail form to:**  
LCU - Accounting Office  
100 Campus View Drive  
Lincoln IL 62656

**OR fax the form to: 217-732-5914**