

CLARKSON COLLEGE
Statement of Financial Responsibility
STUDENT ACCOUNT BALANCE
International Students

Student Name: _____

Please Print

Address: _____

Country: _____ **Postal Code:** _____

Telephone/Cell #: _____ **E-Mail Address:** _____

I understand that upon registering for classes at Clarkson College, I become financially responsible to pay all charges for tuition, fees and on-campus housing (if applicable). I understand it is my responsibility to pay my Student Account Balance **in full** no later than the 4th day after the semester begins. If this balance is not paid in full, I understand I will be withdrawn from all classes on the 5th day of the semester.

(1) Tuition Billing Statements: I understand tuition billing statements are NOT mailed and I must view my account on-line through IQ Web.

(2) Direct payment only: I understand Clarkson College accepts direct payment only. Clarkson College will not bill a third party and payment plans are not available to International Students.

(3) Form of Payment: I understand my payment must be made in U.S. dollars.

(4) Type of Payment: Clarkson College accepts full payment by cash, electronic funds transfer, credit card (VISA, Mastercard, Discover, American Express) and U.S. Postal Service money order only.

(5) Withdrawal from Classes: I understand that if I chose to withdraw or drop a class, in accordance with the tuition refund schedule, any credit balance on my student account that may arise from my withdrawal, will be refunded to me in US dollars, in the form of a check written on a US bank and mailed to the student's address on record. I further understand that if my withdrawal from a class results in a balance due on my student account, this balance must be paid in full upon withdrawal.

I have read and agree to adhere to the terms and conditions of this Statement of Financial Responsibility. I have retained a copy of this document for my records.

Signature of Student: _____ Date: _____