

**REGISTRAR'S OFFICE**

1407 14 Avenue NW  
Calgary, Alberta T2N 4R3

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E: registrar@auarts.ca  
www.auarts.ca

Fall 20 \_\_\_\_\_  Winter 20 \_\_\_\_\_

- All fees are due by the end of the 10<sup>th</sup> day in a semester. **In extenuating circumstances**, the Registrar's Office may authorize extension of the fees payment deadline for degree students. Non-degree students are not eligible for an extension.
- To be granted an extension, students must **demonstrate the ability to pay** by the deferment due date with documentation.
- Students **who have previously defaulted** (i.e. missed the deferred payment due date) will not be considered for another extension.
- Students **expecting government funding** but have not received their funding documents by the fees deadline must apply for a tuition deferment prior to the fee payment deadline.
- **Students requesting a tuition deferment after the fee payment deadline has passed will be assessed late payment penalty's 5% and then an additional 2.5%.**

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ ID#: \_\_\_\_\_  
last first middle

Address: \_\_\_\_\_  
street/box city province postal code

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Major: \_\_\_\_\_ Full-time  Part-time  Year of Study: \_\_\_\_\_

**PROPOSED TERMS OF REPAYMENT (to be completed by student)**

Reason for Deferral Request: \_\_\_\_\_

Source of Income: \_\_\_\_\_

Proposed Method and Date of Repayment: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORIZATION (to be completed by the Financial Aid & Student Award Advisor)**

Tuition Amount: \_\_\_\_\_ Request Approved  Request Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PROMISSORY NOTE (to be completed by student)**

I, \_\_\_\_\_ promise to repay, in full to Alberta University of the Arts the amount of \$ \_\_\_\_\_ on or before \_\_\_\_\_ in accordance with the terms of payment indicated above. I understand that failure to meet this deadline will result in my registration, for the current and any future semesters, being revoked. I furthermore acknowledge that Alberta University of the Arts will not release my degree, diploma, grade statement or transcript of my academic record until the tuition is fully repaid and may employ the services of a collection agency to recover the overdue amount.

FOR VALUABLE CONSIDERATION RECEIVED:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE**

Comments: \_\_\_\_\_

Entered SWAFUND: \_\_\_\_\_ Date Paid: \_\_\_\_\_