

## REGISTRATION FORM\*

**NOTE: Payment is due at time of registration.**

\*Online registration is preferred. This form is only for in-person registration(s) which cannot be accomplished online due to special circumstances.

### STUDENT IDENTIFICATION

Student ID:

Student Name:

### COURSE REGISTRATION REQUEST

Term & Year:

(Add, Drop, ++Audit)	CRN	COURSE PREFIX and NUMBER (eg: ENG 121)	COURSE TITLE	CREDITS

++Audit Grade Option=no credit and no financial aid

### SPECIAL APPROVALS (If Required)

**TIME CONFLICT**

between (CRN) \_\_\_\_\_

and (CRN) \_\_\_\_\_

(Must obtain approval from BOTH instructors)

**OVERLOAD** Credits Approved (List total amount of credits approved)

**OTHER SPECIAL APPROVAL** (List)

### STUDENT SIGNATURE

YOUR SIGNATURE

Indicates you understand the rules, regulations, course loads, prerequisites, and policies of the college as found in the MCC Catalog

YOUR SIGNATURE

Authorizes MCC to use your COF\* funds (if eligible) to pay part of your tuition charges unless otherwise declined below.

\_\_\_\_\_ Initial HERE if you do NOT authorize use of COF funds for courses this term at this institution

*\*The College Opportunity Trust Fund (COF), created by the Colorado Legislature, provides a stipend to eligible undergraduate students. The stipend pays a portion of your total in-state tuition when you attend a Colorado public institution or a participating private institution. Qualifying students may use the stipend for eligible undergraduate classes. The stipend is paid on a per credit hour basis to the institution at which the student is enrolled. The credit-hour amount will be sent annually the Colorado General Assembly. IF YOU HAVE NOT ALREADY APPLIED FOR COF, YOU SHOULD DO SO IMMEDIATELY FOR YOUR STIPEND COURSE SELECTIONS TO BE HONORED. You may apply to the Colorado Opportunity Trust Fund (COF) via the website at <https://www.CollegeinColorado.org>*

HIGH SCHOOL STUDENTS:

YOUR SIGNATURE Indicates permission to have grades released to your high school.

### STUDENT SIGNATURE

### & TODAY'S DATE:



# MORGAN COMMUNITY COLLEGE

## STUDENT FINANCIAL RESPONSIBILITY AGREEMENT

This Agreement is made by and between you and the Colorado Community College System, including Arapahoe Community College, Community College of Aurora, Community College of Denver, Colorado Northwestern Community College, Front Range Community College, Lamar Community College, Morgan Community College, Northeastern Junior College, Otero Junior College, Pueblo Community College, Pikes Peak Community College, Red Rocks Community College, Trinidad State Junior College, and the System Office, hereinafter collectively referred to as the "College".

I agree that at registration, all tuition, fees, and other associated costs will be added to my account and I accept full responsibility to pay my account by the payment deadline. The College is able to accept payment on your student account by check, money order, and most major credit cards. Deferred payment plans and third party payer authorizations may also be available upon checking with the College. The College reserves the right to terminate a payment plan at any time and demand immediate payment. Payments made to your student account through the Office of Financial Aid will be applied by the State government, the Federal government, or the organization providing the funds. Any excess amount paid to your student account through the Office of Financial Aid will be automatically refunded to you.

I agree that my registration and acceptance of these terms constitutes a financial obligation agreement under federal law. My acceptance of the Student 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 the College is providing me educational services and deferring some or all of my payment obligations for those services. All outstanding tuition account balances are also considered qualified educational loans subject to future repayment per United States Internal Revenue Code 221, and as such, my student account balance is exempt from discharge under the federal bankruptcy code, 11 USC (USC) § 523(a)(8). I understand this means my obligations are not dischargeable in Bankruptcy.

I agree to regularly monitor my online student account for billing statements and keep my contact information up to date. I am responsible for keeping the College records up to date with my current physical address, email addresses, and phone numbers by notifying my College's Registrar's Office in writing. Upon leaving the College for any reason, it is my responsibility to provide the College with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to the College.

I give the College or its agents permission to contact me on any phone number or at any address I provide to the College regarding my student account(s)/loan(s). I understand that I may withdraw my consent to call my cellular phone by submitting my request in writing to the College or to the applicable contractor or agent contacting me on behalf of the College.

I agree that technical billing mistakes do not affect my responsibility to pay any amount due. I understand that if I believe there are errors or questions about my student account or I think my student account is inaccurate, I must notify the College immediately.

I agree to drop from a class by the College's deadline or be responsible for all costs associated with the class. I understand that if I do not officially drop from registered courses during the 100 percent tuition refund/credit period as established by my College, I will be responsible for paying the full tuition amount and any other applicable College fees, including, but not limited to room and board, based on the date that I officially withdraw.

I agree to pay any late fees, finance charges, internal/external collection fees, attorneys' fees, returned check fees or other late charges associated with any late payments or returned checks. If I fail

to pay my student account balance each month by the scheduled due dates, the College will assess a late payment fee until the balance is paid in full.

If a payment made to my student account is returned by the bank for any reason, I agree to repay the original amount of the payment plus the applicable returned check fee and other late charges. I understand that multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I sign with the College may result in financial holds and/or financial suspension, which would prevent me from registering for future classes at the College.

I agree that failure to pay amounts due will result in a hold on my student account and prevent me from registering for classes, obtaining transcripts/grades, etc. I understand and accept that if I fail to pay my student account bill or any money due and owed to the College by the scheduled due date, the following penalties apply at the discretion of the College:

1. Registration for future classes at the Colorado Community College System will not be allowed.
2. No transcripts, diplomas, or certification materials will be issued to me by any College in the System until the outstanding debt to the College is paid in full.
3. My grades will be withheld.
4. My past due account may be referred to the College for collection and the College may assess internal collection fees of up to 40% of the unpaid balance.
5. My past due account may be referred to a private collection agency and the delinquency may be reported to national credit bureaus.
6. If my account is referred to a private collection agency, I will be responsible for reimbursing the College for any and all collection agency costs, expenses, and fees, including reasonable attorney's fees, incurred in such collection efforts. I understand that any collections costs are charged in addition to the principal, fees and interest due on my student account.

I understand that the College, as a State agency, has the authority to intercept State income tax refunds due to me from the State of Colorado for debts owed to the State.

I agree to be bound by any changes to these payment terms as communicated to my student account. I understand that the College will provide notice of such change to me via my student portal and that I will have the opportunity to pay my account in full if I dispute any changes. I further understand that it is my responsibility to ensure that I am aware of any changes, including changes to any and all tuition and fees.

**I hereby acknowledge that I have read and consent to the College's Student Financial Responsibility Agreement. I agree that I have carefully read this statement, fully understand it, and agree to be legally bound by it.      SPRING      SUMMER      FALL Year:**

**Student ID** **Age**

**Student Name (PRINT)**

**Student Signature** **Date**

*Students under the age of 18 must complete this Student Financial Responsibility Agreement in paper form with the student and parent signature.*

Parent and student have reviewed and agree to the CCCS Student Financial Responsibility Agreement found at <http://www.cccs.edu/students/Student-Account-Payment-Agreement.pdf>

**Parent Name (PRINT)**

**Parent Signature** **Date**