

Total Amount

Graduate Division TA Fee Deferment Program Application and Payment Agreement 2019-2020

If you are hired as a Teaching Assistant (TA) or Associate-In (sub 0, fixed salary) at a minimum of 25% for the entire quarter, UC San Diego (the University) pays graduate student health insurance (GSHIP) and partial fee remission for you. You are responsible for paying the balance of fees. The TA Fee Deferment program allows graduate students appointed at a minimum of 25% for the entire quarter to pay the balance of their registration fees (excluding nonresident supplemental tuition) through payroll deduction. Deductions will be taken in two equal installments from your second and third paychecks of each quarter: Fall Quarter, November 27 and January 2; Winter Quarter, February 28 and April 1; Spring Quarter, June 1 and July 1. The total fees are \$5785.04 less health insurance of \$1300.00 and less partial fee remission of \$4290.00 for a balance to be deferred of \$195.04. Note: Fees are subject to change. Fees are different for GPS and professional programs. For more information, please see http://grad.ucsd.edu/financial/employment/ases/ta-fee-deferment-loan-programs.html.

DEADLINE: To avoid a \$50 late fee, applications must be received by Graduate Division at least five (5) business days prior to Registration Fee deadline.					
	iee, application	is must be received t	diaduate Divisio	in at least live (3) business days prior to negistration ree deadline.	
Personal Data					
Student Name (Last, First):				Student PID:	
Graduate Department:				Student EID (if applicable):	
Fee Deferment Reques	t				
I request a Fee Deferment (loa	n) to pay the b	alance of my regist	ration fees for the	quarters indicated:	
	_	F-II 2040	Ć405 04*	Submission Deadline:	
		Fall 2019	\$195.04*	9/13/2019	
		Winter 2020 Spring 2020	\$195.04* \$195.04*	12/6/2019 3/13/2020	
			*Amount of fee def	erment	
Certification of Appointment					
(To be completed by Department Coordinator; attach offer letter as verification of employment.)					
Appointing Department:			Ар	pointment Title & % Time:	
Appointment Begin Date:			Ар	pointment End Date:	
Department Coordinator:					
	Print Name			Signature	
Notice of Your Financial Rights and Responsibilities					
Accepting this fee deferment/loan is a legal obligation. It is important that you understand your rights and responsibilities. This statement is provided to inform you of these rights and responsibilities, and in signing this statement, you indicate that you understand and agree to honor them as follows:					
1. I must currently be enrolled and hold an appointment at UC San Diego to qualify for this fee deferment/loan.					
2. I authorize the University to deduct the sum of the amount of the fee deferment/loan from my paycheck in two equal deductions from the					
second and third paychecks of the quarter (November 27 & January 2 for Fall; February 28 & April 1 for Winter; June 1 & July 1 for Spring)					
	3. If any of the amount remains unpaid upon expiration of appointment, I authorize the University to deduct the remaining amount from any and all sums due me from the University. Additionally, if any balance remains after my final payroll check, I will remit the unpaid balance				
	by personal check or money order.				
4. I understand that if this loan is not paid as agreed, my registration and fee payments for subsequent school terms will be prohibited until					
my account is current.					
5. If I still fail to fulfill my promise to repay, my account may be referred to a collection agency, a credit reporting agency and/or legal action.					
PROMISE TO REPAY: For value received, I promise to repay (through payroll deduction) to the Regents of California, the sum					

Submit application to the Graduate Division, Mail Code 0003, (858) 534-6562

Date

listed below according to the terms of this contract.

Student Signature