

GRADUATE DIVISION TA FEE DEFERMENT PROGRAM

Application and Payment Agreement 2018-2019

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

Last Name, First Name

Student PID

Graduate Department

Payroll ID (if previously employed)

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, December 1 and January 1; Winter Quarter, March 1 and April 1; Spring Quarter, June 1 and July 1.

DEADLINE: To avoid a \$50 late fee, applications must be received by the Graduate Division at least five (5) business days prior to Registration Fee deadline.

CALIFORNIA RESIDENTS AND NON-CALIFORNIA RESIDENTS – FEE INFORMATION 2018-2019

| | FALL | WINTER | SPRING |
|---|-----------------|-----------------|-----------------|
| Total Fees | \$5668.62 | \$5668.62 | \$5668.62 |
| (Paid by the University) Less Health Insurance | -1203.00 | -1203.00 | -1203.00 |
| (Paid by the University) Less Partial Fee Remission | <u>-4190.00</u> | <u>-4190.00</u> | <u>-4190.00</u> |
| Balance to be deferred: | \$275.62 | \$275.62 | \$275.62 |

Note: Fees are subject to change. Fees are different for GPS and professional programs; refer to program website for details.

FEE DEFERMENT REQUEST

I request a Fee Deferment (loan) to pay the balance of my registration fees for the quarters indicated:

- Fall 2018** **\$275.62***
 Winter 2019 **\$275.62***
 Spring 2019 **\$275.62***

*Amount of fee deferment

CERTIFICATION OF APPOINTMENT (To be completed by Department Coordinator; attach offer letter as verification of employment.)

Appointing Department

Appointment Title

% Time

Appointment Begin

Appointment End

Department Coordinator (Print Name)

Department Coordinator 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 (December 1 & January 1 for Fall; March 1 & 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 listed below according to the terms of this contract.

\$

Total Amount

Student Signature

Date