During the Fall 2014 semester, The University of the Arts will offer payment plan options to students enrolled in an MEd degree program and/or Professional Institute for Educators graduate certificate programs. ONLY MATRICULATED STUDENTS TAKING COURSES MEETING FOR 7 WEEKS DURING THE SPRING 2015 SEMESTER ARE ELIGIBLE FOR PAYMENT PLANS. A detailed payment schedule is outlined below:

<table>
<thead>
<tr>
<th>Course Schedule</th>
<th>Payment Cycle</th>
<th>Payment Due Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 weeks (January 2015 - March 2015)</td>
<td>Monthly</td>
<td>02/1/15 + 03/01/15</td>
</tr>
<tr>
<td>7 weeks (March 2015 – May 2015)</td>
<td>Monthly</td>
<td>04/01/15 + 05/01/15</td>
</tr>
</tbody>
</table>

**FEES**

**PAYMENT PLAN ENROLLMENT FEE**

Students who enroll in a payment plan will be required to pay a $50 enrollment fee each semester they enroll in a payment plan. This fee is charged once per semester even if a student is enrolled in plans for more than one course. Enrollment fee is due at the time of payment plan registration.

**LATE FEE**

Students will be charged a $50 Late Fee when payments are submitted after the scheduled payment due date per the schedule outlined above.

**MAKING A PAYMENT**

Students will be able to make payments online by credit card via the University of the Arts Portal. Students may also submit payment by credit card or check by mail, fax or phone by contacting the Professional Institute for Educators:

University of the Arts, Professional Institute for Educators
320 S. Broad Street
Philadelphia, PA 19102
Phone: 215.717.6006
Fax: 215.717.6538

Payment Authorization forms can be found online at: cs.uarts.edu/med/payment-plan.

**REGISTRATION**

To register for a payment plan, students must complete and sign this form. **Students are required to pay the $50 Payment Plan Fee at time of payment plan registration.** Students will be notified of payment due dates by email monthly or may elect to enroll in automatic debit.

☐ I have read and understand the policies of the Professional Institute of Educators Matriculated Program Payment Plan. My signature below confirms my enrollment in the specified payment plan.

☐ 7 week (January 2015 - March 2015) Number of Courses to include in plan on this schedule ____________

☐ 7 week (March 2015 – May 2015) Number of Courses to include in plan on this schedule ____________

Student Signature   Colleague ID   Date