

Company Tuition Assistance Agreement Student Accounts Office

PART I: TO BE COMPLETED BY STUDENT: Name:	ID:
Address:	
Terms of Agreement:	e <i>Fee and Enrollment Agreement</i> document.
 Student accepts ultimate responsibility for paramay be assessed late fees per the signed Fee Registration for an additional term while car balance is no more than the amount the employer 	ayment of charges on their student account. Unpaid balances and Enrollment agreement. rying a balance from the prior term is permitted if the loyer has authorized to pay. released until the student's account is paid in full.
Student Signature:	Date:
PART II: TO BE COMPLETED BY EMPLOYER:	
This document acknowledges that this student is eligentees for the noted academic year.	gible to receive tuition assistance to cover educational
Company name and address:	
	
Expected benefit amount per term: Summer \$	Fall \$ Spring \$
The company will send payment: Prior to semes	ter End of semester (pending grades)
Signature of company official:	Date:
Name of company official:	Phone Number:
** Note: Please attach a copy of your company's	tuition assistance policy. **

Return the completed form and documentation by email to student.account@mitchellhamline.edu.