

Diocesan Tuition Payment Form

Semester and Year: _____ (ex. Winter, 2022) **Course #:** _____ **Course #:** _____

Student Information

Date: _____

Last Name: _____ First Name: _____ Prefix: _____

Address: _____ City, Zip: _____

Phone: _____ Home Work Cell

Email Address: _____

Parish Name: _____ **City** _____

Pastor (Manager) Name: _____

Business Manager: _____ Phone #: _____

Email Address: _____

Academic Program Information

University/College Name and Location: _____

Undergrad Graduate Major: _____

Total credit hours needed to complete the program _____ Number of credits completed: _____

Tuition Payment Agreement

I agree to pay the parish contribution listed in the Tuition Payment Agreement above.
 I agree to pay the student portion of tuition indicated in the Tuition Payment Agreement above. I also realize that it is my responsibility to make sure that all tuition payments are up to date on my account.
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	For Office Use		
	Date	Check #	Amount
Total Tuition: _____			
Parish Total: _____	_____	_____	_____
Student Total: _____	_____	_____	_____
Diocesan Total: _____			

As the **parish representative**, I agree to pay the parish contribution listed in the Tuition Payment Agreement above.

Signature *Date*

As the **student**, I agree to pay the student portion of tuition indicated in the Tuition Payment Agreement above. I also realize that it is my responsibility to make sure that all tuition payments are up to date on my account.

Signature *Date*

Send this form with payment or with proof of payment to:

*Note: If you pay the University or College directly. Submit proof of tuition payment and subsidy request to our office to get reimbursed. Any questions feel free to contact, Dcn. Randy Desrochers at rdesrochers@dioceseoflansing.org or Anne Rivet at arivet@dioceseoflansing.org.

Revised January 2023