



Billing and Payment Policy: Third-party Provider Programs

Students participating in a University of Arizona approved third-party provider program must pay fees as set forth below. Student UA Bursar's accounts must be in good standing (i.e. not delinquent) at the time of application and must remain so for the duration of participation in a UA Study Abroad & Student Exchange (SASE) program.

BILLING

Application Fee	Billed by third-party provider
Program Deposit	Billed by third-party provider
Program Charges	Billed by third-party provider
UA Study Abroad Fee	\$600/Summer \$1500/Semester

- **UA Study Abroad Fee:** Students who participate in UA approved third-party provider programs must pay the UA Study Abroad Fee. *The UA Study Abroad Fee is **non-refundable** and will be charged to the student's UA Bursar's account following the student's commitment to the program.* This fee covers all services related to the administration of UA study abroad programs including but not limited to application assistance, advising, course registration, billing, pre-departure orientation, re-entry programming, credit transfer, assistance while abroad, and health and safety monitoring.

SASE will bill charges to a student's UA Bursar's account in the following three categories: TUIT (tuition), HOUS (housing) and OTHR (other). The total of these charges will equal the full cost of the program.

PAYMENT

1. Students can pay their accounts according to [UA Bursar's Office payment options](#).
2. Charges are due and must be paid according to the UA Bursar's Office payment deadline set forth in the students' UAccess account.
3. Late fees for past due balances will be assessed to the student's UA Bursar's account in accordance with [UA Bursar's Office policy](#).





4. Students whose accounts are delinquent will be subject to a past due balance charge, recovery of collection and legal costs, and withholding of University services. See http://www.bursar.arizona.edu/ar-collections/past_due.

I HAVE READ AND I UNDERSTAND THIS STUDY ABROAD BILLING AND PAYMENT POLICY. IT IS MY RESPONSIBILITY TO MAKE THE CONTENTS OF THIS POLICY KNOWN TO THOSE WHO HAVE ANY FINANCIAL RESPONSIBILITY FOR OR ARE OTHERWISE FINANCIALLY INVOLVED IN ANY STUDY ABROAD PROGRAM PAYMENTS (e.g. parents, relatives, financial institutions). I ACKNOWLEDGE THAT I AM SUBJECT TO THE TERMS OUTLINED ABOVE.

Student Name: _____ Date of Birth: _____
First Middle Initial Last

By signing below, the parent or legal guardian affirms that they understand the language in this document pertains to their child, and that by signing, they are legally responsible for the obligations described in this agreement and agree to be bound by its terms.

Parent/Guardian Name: _____ Relationship: _____
First Middle Initial Last

Signature of Parent: _____ Date: _____

