



## **UNIVERSITY OF COLORADO DENVER | ANSCHUTZ MEDICAL CAMPUS**

### **Tuition and Fee Agreement and Disclosure**

The payment of all tuition, fees, and charges becomes an obligation of the student upon registration at the University of Colorado Denver | Anschutz Medical Campus ("University"). By agreeing to these terms and conditions, I authorize the University to add to my account all tuition, fees, and housing costs as approved by the Board of Regents.

#### **Bills:**

I agree that I am responsible for checking online through UCDAccess to see whether I have a bill and whether I owe any money to the University. After I register, or I am block enrolled by my department, I understand that my bill will be made available online, and I will be sent notification of its availability at my University (@ucdenver.edu or @cuanschutz) email address. If I do not receive an email notification, I understand that I am still responsible for the required payment. I understand that I will not be receiving a paper bill in the mail.

See the Billing Calendar on the Bursar's Office website: [www.ucdenver.edu/Bursar](http://www.ucdenver.edu/Bursar) for specific dates and deadlines each semester.

#### **Payment:**

Payment for the tuition and fees detailed on my e-bill is due on the date listed on the e-bill in the student portal. I will receive my tuition and fee e-bill the month after I register for courses and payment will be due on the date specified on my e-bill.

Payments must be received by the published due date; postmarked dates are not honored. Failure to pay by the published due date will render my account past due and result in an assessment of past due charges (details below). I understand that in order to avoid these charges, I must pay my account by the due date of my e-bill. Please see the Denver [Bursar's Calendar](#) or Anschutz [Bursar Calendar](#) for specific dates and deadlines each semester.

I understand that I am registering for educational courses at the University and that I will be expected to pay for them. I hereby acknowledge and agree that I am fully responsible for the cost and expense of all tuition, fees, and other related educational expenses associated with my receipt of educational services at the University, even if course modality (online, remote, hybrid, in-person) changes or circumstances result in modification, termination, or suspension of some services. Tuition and fee charges are subject to change every term. I understand that I am responsible for maintaining my current address and phone number via my student portal. If I expect financial aid to pay all or part of my financial obligation to the University, I understand that it is my responsibility to meet all requirements for disbursement to my student account. I am responsible for ensuring that all requirements of grantors, lenders, employers, and other thirdparty payers are met on a timely basis. I understand that if my financial aid is reduced or canceled, I am responsible for paying back to the University any amounts that I am not eligible for under applicable financial aid guidelines. I understand and agree that by registering for courses, I will be responsible for payment regardless of attendance unless I meet the posted withdrawal dates.

### **Payment Plans:**

I understand that I may have the option to pay my tuition bill over a period of time by enrolling in a payment plan. If I am eligible and choose to enroll in a payment plan, the following terms apply:

1. Payments must be made through electronic funds transfer (ACH) from a regular checking or savings account or automatic debit from a credit/debit card. (A nonrefundable 2.85% service fee applies to each credit/debit card transaction.)
2. An enrollment fee of \$35 applies at time of enrollment. As of Fall 2023, the payment plan enrollment fee will increase to \$40.
3. A \$30 returned payment fee applies to returned payment plan payments.
4. The amounts I need to pay may change due to recalculations resulting from changes to my bill, such as adding or dropping classes, College Opportunity Fund (COF), tuition waivers, financial aid, etc. If this occurs, I understand and agree to take action to rebalance my payment plan by logging in to the student portal and following the on-screen instructions.
  1. A rebalance of my payment plan agreement resulting in decreased future payment amounts will be completed automatically before the next payment withdrawal date.

2. A rebalance of my payment plan agreement resulting in increased future payment amounts will require an action on the part of the Payment Plan owner. This will not happen automatically.
5. While I am actively enrolled in a payment plan, I will not be subject to late fees and service charges.
6. I agree to abide by the Terms and Conditions of the Payment Plan Agreement if I choose to enroll.

NOTE: Enrollment fees are processed immediately! All monthly payments are processed automatically on the 20<sup>th</sup> of each month. If the 20<sup>th</sup> falls on a weekend or holiday, payments will be processed on following business day.

If the automatic withdrawal on the 20<sup>th</sup> of the month fails due to insufficient funds or invalid account information, a second attempt will automatically be attempted approximately a week later. Notification will be sent via email in the case of a failed attempt, providing enough time for me to correct inaccurate information or to change the funding sources. If the second attempt fails, a \$30 returned payment fee will be applied, my payment plan will be terminated, and my balance will be subject to late fines and service charges.

For more information, visit [Payment Plans](#). If I do not pay an installment by the deadline, I may be assessed a late payment charge as described below and a one percent (1%) per month finance charge on the unpaid balance. I understand that if I or my authorized payer enroll in a payment plan, I am responsible for any unpaid balance on my student account if an authorized payer and/or plan owner fails to honor the terms and conditions of the Payment Plan Agreement.

### **Late Payment Charges:**

I understand and agree that if I fail to pay my student account bill or any monies due and owing the University by the scheduled due date, the University will assess a late payment charge once per term (see table below) and service charges at the rate of 1% per month on the past due portion of my student account until my past due account is paid in full. Late payment charges and service charges will only be reversed if a University error caused the late payment charges and service charges to be assessed.

Balance Due	Late Charge
\$1.00 - 99.99	\$5.00
\$100.00 - 299.99	\$10.00
\$300.00 - 499.99	\$20.00
\$500.00 - 699.99	\$30.00
\$700.00 - 899.99	\$40.00
\$900.00 and over	\$50.00

I understand that administrative, clerical, or technical billing errors do not absolve me of my financial responsibility to pay the correct amount of tuition, fees and other associated financial obligations assessed as a result of my registration at the University.

### **Billing Disputes and Inquiries**

If you think a bill is wrong or if you need additional information about a transaction on your bill, you must write to us at:

University of Colorado Denver | Anschutz Medical Campus  
Bursar's Office  
1201 Larimer Street  
Denver, CO 80204

Write us as soon as possible. We must hear from you within 60 days from the end of the term, or your right to dispute the bill will be waived. You may call us at 303-315-1800, but doing so will not preserve your rights. In your letter, give us the following information:

- Your name and student identification number

- The dollar amount of the suspected error
- Describe the error and explain, if you can, why you believe there is an error
- If you need more information, describe the item about which you have a question

### **Returned Payment Policy:**

I understand that I will be assessed a \$30 fee for each payment returned (regardless of the amount) and my payment plan may be cancelled. If my payment plan becomes void, I understand that I may be assessed a late payment charge as described above, and a 1 percent (1%) monthly service charge on the unpaid balance. I may be required to use certified funds to make future payments.

I understand that the University will review credit card chargeback transactions on a case-by case basis. I hereby acknowledge that, as a result of a credit card chargeback, I may be subject to restriction in the use of debit/credit card transactions in the future and may be assessed additional fees or associated costs.

### **Withdrawal:**

I understand that if I do not officially withdraw from registered courses by the published deadlines for 100 percent (100%) tuition refund/credit period, or have any change in my financial aid eligibility, I will be responsible for paying some or all of the tuition amount and fees based on the date that I officially withdraw. Even if I withdraw from my classes, I may still incur additional charges, including but not limited to, room, board, and other departmental or University fees. See How to Withdraw From Courses on the Office of the [Registrar's website](#).

### **Medical Withdrawals:**

Medical withdrawals are for CU Denver students diagnosed with either physical or psychological medical conditions that significantly impact their safety or ability to be academically successful are eligible to petition for a medical withdrawal. Due to the Medical Withdrawal Policy, students will be withdrawn from all classes enrolled for the applied semester; partial withdrawals are not permitted. Students seeking to withdraw for non-medical reasons will need to review the withdrawal policies and procedures for their respective school or college.



The form can be located here [Cash Management Form](#). Please note a tuition appeal must also be submitted as outlined below to be considered for a refund or associated tuition and fee charges.

CU Anschutz Medical Campus students seeking a medical leave of absence should work with their academic program department directly and visit [Medical Leave of Absence](#) for additional information.

### **Tuition Appeals:**

Tuition Appeals are for CU Denver students who are requesting a refund of their tuition and fee charges due to extenuating circumstances for dropped classes that occurred during the semester. Tuition Appeals must be submitted within 6 months following the semester in dispute to be considered. Tuition appeal forms are available at the [Tuition Appeals Page](#).

CU Anschutz Medical Campus students seeking a tuition appeal should work with their academic program department directly.

### **Housing Termination/Petition:**

The CU Denver Department of Housing & Dining allows residents who wish to cancel their contract the ability to submit a petition for termination per the Resident Handbook. You must complete a Housing Contract Termination Petition. You must contact the Student Accounts Manager at [Melissa.niblack@ucdenver.edu](mailto:Melissa.niblack@ucdenver.edu) for more information about the petition process. Please note that submission of a Housing Contract Termination Petition does not guarantee that your housing contract will be terminated and/or terminated at a reduced cost.

### **Failure to Pay:**

If I do not make the required payment in accordance with the due dates of the charges and my student account becomes past due, I will pay a late charge and service charge on the unpaid balance of my tuition and fees. The University will calculate the service charge on the unpaid principal balance by applying the periodic rate of 1 percent (1%) per month (Annual Percentage Rate of 12%) to the unpaid principal balance amount less any payments or credits made. In addition, I will pay one late charge per semester according to the late charge stipulations stated

above. I understand that I may avoid assessment of service charges and the late charge by paying the full amount, or establishing a payment plan for amount of the tuition and fees due by the published date for the term in which I am enrolled. I understand that if I am eligible for a payment plan option and I elect to enroll in a payment plan, I am responsible for any unpaid balance on my student account.

### **Past Due Accounts:**

I understand that if I fail to pay the total amount due for all charges, I am subject to the following penalties:

1. Registration for future terms will not be allowed on all balances of \$1500.01 and over.
2. No transcripts, diplomas, or certification materials will be issued to me until my account is paid in full. Exceptions for qualified reason are listed below.
3. My past due account may be referred to the University's Student Debt Management Department and/or a private agency for collections.
4. My past due student account may be referred to a third-party collection agency and reported to one or more credit bureau reporting services; I explicitly authorize the University to release personal and financial information under those circumstances. To the extent permitted by applicable law, I agree to reimburse the University the fees and or costs of any collection agency, which may be based on a percentage at a maximum of 40% of the debt, and all costs and expenses, including reasonable attorney fees, we incur in such collection efforts, as allowed under Colorado law.
5. I am responsible for reasonable 'attorneys' fees and court costs associated with collecting or enforcing my past due account as allowed under Colorado law allowed under C.R.S. §23-5-113.
6. Pursuant to Colorado Revised Statutes (CRS) § 23-5-115, in the event of a default of my account owed to the University, the University may certify to the Colorado Department of Revenue (DOR) information about me, including my name, social security number, the amount of the debt and any other identifying information required by the DOR. The DOR may then disburse funds.



All outstanding tuition account balances are considered qualified educational loans under 26 United States Code (USC) § 221 and are extended with the express understanding that future repayment shall be made to the University. I further understand that my acceptance of these terms represents my acknowledgement and acceptance of my student account balance as a qualified education loan under Internal Revenue Code 221, and as such, its exemption from discharge under the federal bankruptcy code, 11 USC (USC) § 523(a)(8).

Students who owe a past due outstanding balance may request and receive transcripts, diplomas, or certification materials under the following circumstances:

- if it is for a job application;
- transferring to another postsecondary institution;
- applying for state, federal, or institutional financial aid;
- pursuit of opportunities in the military;
- pursuit of other postsecondary opportunities.

## **Communication**

**Method of Communication:** I understand and agree that the University uses email as an official method of communication with me, and that therefore I am responsible for reading the emails I receive from the University, at my University (@ucdenver.edu or @cuanschutz) email account, on a timely basis.

**Contact:** I authorize the University and its agents and contractors to contact me through all numbers associated with my account and any future cellular phone number(s), email address(es) or wireless device(s) regarding my delinquent student account(s)/loan(s), any other debt I owe to the University or to receive general information from the University. I authorize the University and its agents and contractors to use automated telephone dialing equipment, artificial or prerecorded voice or text messages, and personal calls and emails, in their efforts to contact me.

Contact will include but is not limited to discussion of my past due tuition account, loan(s), and other institutional services now and in the future so long as they comply with the requirements of the Colorado Fair Debt Collection Practices Act, section 12-14-101 et seq., C.R.S





Furthermore, I understand that I may withdraw my consent to call my cellular phone by submitting my request in writing to University of Colorado Denver | Anschutz Medical Campus 1201 Larimer Street #5123, Attention Bursar Office, Denver, CO 80204, or in writing to the applicable contractor or agent contacting me on behalf of the University.

**Updating Contact Information:** I understand and agree that I am responsible for keeping the University records up to date with my current physical addresses, email addresses, and phone numbers by following the procedure on UCDAccess. Upon leaving the University for any reason, it is my responsibility to provide the University with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to the University.

## **Financial Aid**

I understand that my Financial Aid Award is contingent upon my continued enrollment and attendance in each class upon which my financial aid eligibility was calculated. If I drop any class before completion, I understand that my financial aid eligibility may decrease and some or all the financial aid awarded to me may be revoked. If some or all my financial aid is revoked because I dropped or failed to attend class, I agree to repay all revoked aid that was disbursed to my account and resulted in a credit balance that was refunded to me.

## **Privacy Rights & Responsibilities**

I understand that the University is bound by the Family Educational Rights and Privacy Act (FERPA) which prohibits the University from releasing any information from my education record without my written permission. Therefore, I understand that if I want the University to share information from my education record with someone else, I must provide written permission. I further understand that I may revoke my permission at any time.

## **IRS Form 1098-T**

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to the University upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. I may consent to receive my annual IRS Form 1098-T, Tuition



Statement, electronically from the University on the UCDAccess portal. I understand that if I do not consent to receive my Form 1098-T electronically, a paper copy will be provided. **Entire Agreement:**

This agreement supersedes all prior understandings, representations, negotiations and correspondence between the student and the University and constitutes the entire agreement between the parties with respect to the matters described. This agreement shall not be modified or affected by any course of dealing or course of performance. This agreement may be modified by the University if the modification is signed by me. Any modification is specifically limited to those policies and/or terms addressed in the modification.

**Severability:**

If any term of this agreement is to any extent illegal, otherwise invalid, or incapable of being enforced, such term shall be excluded to the extent of such invalidity or unenforceability; all other terms hereof shall remain in full force and effect; and, to the extent permitted and possible, the invalid or unenforceable term shall be deemed replaced by a term that is valid and enforceable and that comes closest to expressing the intention of such invalid or unenforceable term.

**Agreement:**

This agreement will be presented to me every term of enrollment for review of the University of Colorado Denver | Anschutz Medical Campus's policies regarding my financial obligation.

I hereby acknowledge that I have read and expressly consent to the University's Tuition and Fee Agreement and Disclosure. By clicking on the "I AGREE" button below, I agree that I have carefully read this statement, fully understand it, and agree to be legally bound by it.

Agreed by: Dindinger,Eva / DIND000002 100002856

Term: 2257

Date/Time Stamp: 2025-03-13T08:01:55-0600