

SENIOR CITIZEN COURSE ENROLLMENT & AUDIT SELECTION

Instructions: This form is for Senior citizens who wish to be considered for the Senior Citizen Fee Waiver. This form must be completed and submitted to the Registrar’s Office including all signatures (student and instructor). Students who qualify will be registered by the Registrar’s Office during the Add/Drop period and not prior. Student’s should also agree to the **Financial Terms and Conditions** prior to registration, please see the final page of this form. Return all completed forms to the Registrar’s Office for processing. The Registrar’s Office may not be able to process registration for a class that is full, so please allow for additional processing time if the course you wish to add is full. Student will be enrolled during the Add/Drop period. Senior Citizen students who are not pursuing a degree and are non-degree must also complete the Non-Degree online application if they are a new student.

Student Name: _____ **Phone:** _____

Term: Fall _____ Winter _____ Spring _____ Summer _____
(Year) (Year) (Year) (Year & Session)

Please add this class:

Course Prefix	Course Number	Course Section	Course Title	Course Time
<i>For ex: HIS</i>	<i>200</i>	<i>02</i>	<i>World Civilization II</i>	<i>1:00-2:50 pm</i>

I would like to take this course for (please initial): **Credit** _____ **Audit** _____

I understand that once this agreement is made, it may not be changed. I further understand that the grade of Audit (AU) will be recorded on my transcript and the course may not be counted towards a degree requirement. *Please note you have until the end of the 9th week to elect to audit a course.*

Student’s signature: _____ **Date:** _____

Instructor’s Signature: _____ **Date:** _____

FEE WAIVER

The Board of Trustees at West Chester University has approved a waiver of tuition and all auxiliary fees for senior citizens enrolling in classes on a **space-available basis**. The Board stipulates that a person applying for the fee waiver must be sixty years of age or older, retired, and a resident of Pennsylvania for at least a year. The Registrar’s Office reserves the right to request a valid Pennsylvania ID in order to apply the fee waiver to the account at any point.

I certify that I am: sixty years of age or older, a resident of Pennsylvania and am retired from an occupation.

Student’s Signature _____ Date: _____

The Senior Citizen Program does not include internships, independent study, individualized instruction, student teaching, thesis, seminar or any similar course requiring extra faculty compensation. Students may also have fees related to course materials or Inclusive Access materials.

WCU ID#: _____

Term: _____

Financial Terms & Conditions Agreement

West Chester University of PA Financial Terms and Conditions Agreement

In order to register for courses, all students must complete the *West Chester University of PA Financial Terms and Conditions Agreement*. Please read the information carefully. Once you have finished reading this agreement, click “**I agree**”, located at the bottom of this page. Please be aware that if you do not accept, you cannot register for courses.

This agreement covers current and future courses scheduled and/or fees incurred during the entire period you are enrolled at West Chester University.

Acknowledgment of Responsibility

1. By registering for courses at West Chester University (the “University”), I hereby acknowledge that I am entering into a contractual arrangement and agree to take financial responsibility for payment of all tuition, fees and other charges on my student account associated with enrollment and/or attendance.
2. If I decide to not attend a course or courses, it is my obligation to “drop” or withdraw from these courses myself, or with the assistance of the Registrar’s Office. The date used for this withdrawal is the date the Registrar’s Office receives the document, not when I stop attending the class. I understand simply telling the professor I am not going to attend is not sufficient. See Withdrawal information below.
3. I acknowledge the current published tuition and fees schedules are available at [Bursar Tuition&Fees](#) and that tuition and fee charges are subject to change every semester.

General Provisions

1. My student account, **myWCU**, reflects a balance I currently owe for educational services obtained from and the associated costs of attending the University or registrations I have already processed (or were processed on my behalf).
2. The University will not bill third parties on my behalf.
3. I understand by accepting this agreement that the primary method of notification regarding **myWCU**, registrations, invoicing, financial aid and other related communications regarding my attendance at the University, will be via my University email account. Financial Aid communications will include but not be limited to award letters/notifications and disbursement notifications. I understand it is my obligation to check this email account regularly and I will be held responsible for the communications there within.
4. I understand that I am agreeing to receive electronic notices and communication from the University. I agree to allow the University and its representatives, attorneys and agents (including collection agencies) to contact me at my current or any future mobile phone number, home phone number and email address I provide, including by way of automated telephone dialing systems, artificial or pre-recorded voice or text messages, or personal calls for purposes of collecting any portion of my student financial obligation which is past due as well as any other loan, default or education matter pertaining to my enrollment in or attendance at the University. I understand that others may be able to review my messages and/or emails sent to, from or on behalf of the University, which may include information about my debt and its status.
5. I understand and agree that I am responsible for keeping the University up to date with my current mailing addresses, email addresses, and phone numbers by following the procedures set by the Registrar’s Office: [Change Local and Home Address](#)

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.

6. The University is an institution of higher education. As such, all or a portion of my student account is considered to be an educational loan offered for the sole purpose of financing an education and is not dischargeable in bankruptcy proceedings.
7. This agreement will be in effect until I have fulfilled all financial obligations to the University and the University has terminated this agreement.

WCU ID#: _____

Term: _____

Repayment

1. I understand that when I register for any class at the University or receive any service from the University I accept full responsibility to pay all tuition, fees and other associated costs assessed, including late fees and interest that may be assessed, as a result of my registration and/or receipt of services. I further understand and agree that my registration and acceptance of these terms constitutes a promissory note agreement (i.e., a financial obligation in the form of an educational loan as defined by the U.S. Bankruptcy Code at 11 U.S.C. ss523(a)(8)) in which the University is providing me educational services, deferring some or all of my payment obligation for those services, and I promise to pay for all assessed tuition, fees and other associated costs by the published or assigned due date.
2. If payment is made by check and the check is returned, I agree that a fee of \$25 for a returned item will be charged to my student account. If payment is made by electronic check and the item cannot be processed successfully for any reason, I agree that a fee of \$25 for the item will be charged to my student account.
3. If I expect financial aid to pay all or part of my financial obligations to the University, I understand that it is my responsibility to meet all requirements for disbursement to my student account. I authorize the University to use the financial aid to pay for all education costs charged to my student account for my entire period of enrollment or attendance at the University. Should the lender or provider of the funds make an adjustment for any reason that would reduce my aid, the resulting balance is due by me.
4. I understand that it is my responsibility to ensure that all requirements of grantors, lenders, employers, and other third-party payers are met on a timely basis. I understand that, despite my expectations for payment from financial aid or other sources, I am ultimately responsible for all charges incurred.
5. I understand that my financial aid may be adjusted due to eligibility. I agree to pay back to the University any amounts that I am not eligible for under applicable financial aid guidelines.

Late Fees

1. If I fail to pay my student account, I understand the University will charge a \$50 late payment fee.

Billing Disputes

I understand that if I believe a charge on my bill is incorrect, it is my responsibility to notify the Office of the Bursar by mailing a letter containing (1) my name and student identification number, (2) the dollar amount of the contested charge, and (3) why I believe the charge is incorrect, to:

West Chester University |Office of the Bursar | 25 University Avenue, Suite 50 |West Chester, PA 19383

Default

I will be in default if I break any promise made to the University or fail to perform promptly at the time and in the manner provided in my housing plan, meal plan, or tuition plan agreement with the University or fail to pay other charges (including, but not limited to, graduation fees, music instrument rental charges, health center charges, Study Abroad trip charges, USH charges, Inclusive Access book charges, or financial aid adjustments) that post to my student account by the due date on the bill.

Collections & Rights of University Under Default

1. I understand and agree that if I fail to pay my student account bill or any monies due and owing to the University by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, the University may attempt to collect the debt or may refer my delinquent account to the Office of Attorney General or a third-party collection agency or attorney for collection.
2. I further understand that if the University refers my student account balance for collection, I will be responsible for all costs and expenses (including reasonable attorney's fees) associated with attempting to collect the monies due and owing. The collection fee will be calculated at the maximum amount permitted

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by applicable law, but not to exceed 33% of the amount outstanding. If a lawsuit is filed to recover an outstanding balance, I will also pay any court costs, in addition to all other sums provided by law.

3. Finally, I understand that my delinquent account may be reported to one or more of the national credit bureaus.

Withdrawal

1. I understand that I must abide by official University policies regarding withdrawal from the university. Withdrawal from the University, whether voluntary or at the request of the University, does not exempt me from payment in full for charges incurred while attending the University. Similarly, simply ceasing attending courses does not exempt me from the payment of the course or courses. I must follow the process for withdrawing, and complete the appropriate paperwork. <https://wcupa.edu/registrar/refundsWithdrawals.aspx>
2. Depending on the date I withdraw, I understand that any financial aid previously disbursed, or not yet disbursed may be reduced and returned to the lender or provider, and repayment of these funds to the University may be required to cover the charges remaining. Additionally, any previously issued refunds may no longer be valid, and may be due back to the University in full or in part. The order in which financial aid is returned, and the calculation thereof, resides within the scope of the Financial Aid Office. The Financial Aid Office should always be consulted prior to any withdrawal activity to discuss the consequences of these potential actions.
3. Reduction in charges resulting from a withdrawal is governed by the Refund Policy issued by Pennsylvania State System of Higher Education. Current withdrawal dates, Add Drop periods, and policies are posted on the University's website. Not all withdrawals will result in reduced charges.
4. I understand that if I withdraw from the University and reside in University Student Housing (USH) I must abide by the terms and conditions of my lease. The West Chester University refund policy does not apply to USH housing charges.

Withhold Diplomas, Transcripts, Grades

The University may withhold my official transcript, diploma, or grades until all my financial obligations have been met.

Preventing Registration Activities

The University may prevent future registration until all my financial obligations have been met. I understand if I make a payment to clear a prior debt and have a restriction removed to register, any registrations obtained may be removed should that payment be returned unpaid for any reason.

Credit Bureau Reporting

I understand that failure to pay my student account may result in the University, or its representatives, attorneys and agents filing an adverse report with credit bureaus.

Privacy Rights & Responsibilities

I understand 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 by following the procedure outlined at: [FERPA policy/procedure](#). I further understand that I may revoke my permission at any time as instructed in the same procedure.

IRS Form 1098-T

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to the University

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upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to provide my SSN or TIN to the University, I agree to pay any and all IRS fines assessed as a result of my missing SSN/TIN. I consent to receive my annual IRS Form 1098-T, tuition Statement, electronically from the University. I understand that if I do not consent to receive my Form 1098-T electronically, a paper copy will be provided. I understand that I can withdraw this consent or request a paper copy by following the instructions at: <https://heartland.ecsi.net/index.main.html#/access/lookup>

Governing Law

This agreement will be governed by the laws of the Commonwealth of Pennsylvania and any disputes arising from this Agreement shall be determined in accordance with the law of this jurisdiction.

Entire Agreement

1. This agreement supersedes all prior understandings, representations, negotiations and correspondence between the student and the University, constitutes the entire agreement between the parties with respect to the matters described, and 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.
2. If any provision, term, or clause of this agreement is declared illegal, unenforceable, or ineffective in a legal forum with competent jurisdiction to do so, this agreement shall be deemed severable, and all other provisions, terms, and clauses of the agreement will remain valid and binding on the parties.
3. I understand by checking this box I am acknowledging that I have read this entire agreement and am legally bound to these terms and conditions, which are binding upon me, my heirs, executors, administrators, successors and assigns.

Student Signature: _____

Date: _____