

## **Permission to Pay Later**

Student Nar	me:	ID Number:
Place of Em	ployment:	
Date of App	olication:	Email:
******	*******	**********************
PLEASE REA	AD THE FOLLOWING	AND SIGN FOR AGREEMENT
specified ur	nder the fees section	reby authorized to register for classes at UPEI and IS SUBJECT TO LATE FEES as of the University Calendar for Non-payment of Fees at the time of registration. of 1% per month is charged on overdue accounts.
I am unable	to pay my full fees a	at this time for the following reason(s):
	Waiting for student	t loan from the province of
	Waiting for bursary	from the province of
	Other (how will pay	ments be made)
I will pay my	y full outstanding acc	count by the following date:
		ses are required to file a <b>WRITTEN NOTICE</b> with the Registrar's Office. Only by at be credited for tuition as outlined in the University Calendar.
I have read	and agree to the abo	ove.
Signature:		
******	******	**********************
FOR OFFICE	USE ONLY	
Enter	red in PERC	
Authorized:_		Date:

Protection of Privacy - The personal information requested on this form is collected under the authority of Section 31(c) of the PEI Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of assessing payment arrangements. Direct any questions about this collection to Financial Services, University of Prince Edward Island, 550 University Avenue, Charlottetown PE C1A 4P3 (902)566-6000.