LOYOLA
UNIVERSITY CHICAGO
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Office of the Bursar
Lake Shore Campus
1032 W. Sheridan Road | Chicago, Illinois 60660
Phone 773.508.7705 | Fax 773.508.8727
bursar@luc.edu

Dear Graduate Business Student,

Thank you for your interest in the Loyola University Chicago Employer Reimbursement Plan (ERP) for Graduate Business students. There are separate applications for Semester students and Quarter students.

The Employer Reimbursement Plan allows Graduate Business students who are eligible for tuition reimbursement to defer payment of those tuition and fees covered under their employer agreement. The application fee is **$120.00 per quarter.** You must re-apply each quarter and pay the application fee each quarter you want to participate in the ERP program.

NOTE: ALL NON-DEFERRED TUITION AND FEES ARE DUE AT THE TIME OF APPLICATION.

For example, if your employer will pay 90% of tuition and fees, that is the amount of tuition and fees we will defer through the ERP. The remaining 10%, along with the $120.00 application fee, will be due with the application.

Applications are accepted based on the following schedule: **EARLY & LATE FORMS ARE NOT ACCEPTED.**

Term	Enrollment Period Begins		Enrollment Period Ends		Payment Due	
Fall	07/01/2023		08/29/2023		12/05/2023	
Winter	10/21/2023		11/12/2023		03/05/2024	
Spring	02/03/2024		02/25/2024		06/05/2024	
Summer	05/01/2024		05/22/2024		09/05/2024	

To apply for ERP, please submit:

☐ The completed Deferred Tuition Agreement form
☐ A copy of your employer's reimbursement plan
☐ The $120 application fee – cash or check only. **On line payments are unacceptable**.
☐ Cash or check for any non-deferred tuition and fees

and mail or drop off forms and check(s) at one of the following Office of the Bursar locations:

Loyola University Chicago
Sullivan Center Suite 190
1032 W. Sheridan Rd.
Chicago, IL 60660

Loyola University Chicago
Corboy Law Center lobby, Bursar Office
25 E. Pearson
Chicago, IL 60611

If you have any questions about the ERP, please contact the Office of the Bursar at (773) 508-7705 or email to bursar@luc.edu.

Sincerely,

Susie Ryan
Office of the Bursar

Office of the Bursar
Employer Reimbursement Plan- Graduate Business
Deferred Tuition Agreement

2023-2024 TO BE COMPLETED BY STUDENT: Please check the appropriate term. **Early & Late forms are not accepted. Please submit a new form each quarter.**

Check ONLY one Quarter per Application		Quarter	Enrollment Period Begins	Enrollment Period Ends	Payment Due
		Fall	07/01/2023	08/29/2023	12/05/2023
		Winter	10/21/2023	11/12/2023	03/05/2024
		Spring	02/03/2024	02/25/2024	06/05/2024
		Summer	05/01/2024	05/22/2024	09/05/2024

▷ *I agree to all of the terms and conditions set forth in this agreement (listed below) and I am aware that if my employer does not pay by the Payment Due date, I am liable to pay the balance owed in full at that time.* **The application is void if required sections are not initialed.**

Under the terms of this deferred tuition agreement**:**

1. I have paid in full all non-deferred balances from prior terms.   **Initial here:__**
2. I agree I can only borrow loans to cover the amount my employer does not pay.   **Initial here: __**
3. I agree to pay my tuition account in full no later than the due date even if I have not completed my course(s), or reimbursement has not been issued by my employer.   **Initial here: __**
4. I understand this deferment covers only that percentage of the tuition and fees that will be paid by my employer. All other charges are due at the time of application.   **Initial here: __**
5. I understand that if my account is not paid when due: **Initial here: __**
    a. A late payment fee of 1.5% may be assessed monthly on the past due balance.
    b. I will be unable to receive University services and register for future terms.
    c. My account may be referred to collections, reported to a credit bureau, and charged with collection costs.
    d. I will be ineligible to participate in the ERP plan for future terms.

▷ *Enclosed is my $120 non-refundable application fee (cash or check only) and payment in full for any non-deferred charges for the term indicated. All applications will be denied if incomplete, received without appropriate payment or after the deadline.*

Student Signature_____ Date _____

Student Name_____ Student ID Number _____

Permanent Address_____
    (Please print)
    Street   City   State   Zip

Telephone Number_____ Loyola E-mail _____

USE ACCOUNT SUMMARY TO FILL THESE AMOUNTS:

Amount of Tuition This Term_____ Amount of Fees This Term_____ Total Amount This Term_____

Total Amount of Tuition & Fees **That Employer Will Pay**_____

Are you receiving any tuition discounts? ☐ Scholarships/Grants   ☐ N/A

Bills and grades are issued to the student only. It is the responsibility of the student to provide any required documentation to their employer. The University does not accept responsibility for delays in the U.S. Postal System. *Please return application to the Office of the Bursar at either address listed on page 1.*

TO BE COMPLETED BY EMPLOYER:

I hereby certify that (employee name)_____*is employed at*

_____
Business Name   Address   City   State   Zip

and is eligible to participate in the employee tuition reimbursement program.

Maximum dollar amount or percentage paid for **this term** under the reimbursement plan _____

Terms and conditions of repayment_____

Name of Business Representative_____ Title _____

Signature_____ Date_____ Telephone Number _____

Random audits may be conducted by the University to verify the employment information you have provided.
Return a copy of your employer's reimbursement plan, fees, and application to one of the Bursar locations by the specified deadline.

Office Use Only: Approved By: _____ **Date:**_____

Tuition:_____ **Fees:**_____ **Amount Deferred:**_____ **Term:**_____ **Defer Due Date:**_____