GUARANTOR AUTHORIZATION and DEBT REPAYMENT AGREEMENT

STUDENT NAME_________________________________________ COMMODORE ID NUMBER________________________

- By signing this form, I (student and guarantor) hereby expressly agree and accept that I am entering into a legally binding contract to pay any and all charges and expenses for educational services at Vanderbilt University not covered by Financial Aid, which may include, but are not limited to, tuition, housing, meal plans, student health insurance, commodore cash, meal money, student services fee, library charges, traffic fines, and other university charges for any and all periods of enrollment at Vanderbilt University. I acknowledge and agree that certain institutional charges and expenses are assessed on a per-term basis and that pro-rated refunds or other adjustments to the student account may not be available if, for any reason, the student withdraws officially from attendance before the end of the term, is suspended or dismissed/expelled for academic or disciplinary reasons, is present on campus for only a portion of the academic term, or the length of the academic term is shortened. I understand that the refund schedule applicable to students who withdraw officially or who are dismissed from the university for any reason is available at https://www.vanderbilt.edu/stuaccts/. Also, I (student) hereby grant consent for Vanderbilt University to disclose to the Guarantor(s) any and all financial information related to my account for the purpose of informing Guarantor(s) about the account, its status, and any unpaid account balance.

- I (student and guarantor) understand that I will be invoiced by email notification on or about the first business day of each month for all unpaid charges, and that no paper invoices will be mailed. Any invited “payers” and I will receive an e-mail notification when new invoices/e-bills become available. For more billing information, please visit our website at www.vanderbilt.edu/stuaccts/ebill.html.

- I (student and guarantor) understand that unless otherwise noted, payment for tuition is due at the beginning of the term regardless of when registration takes place. If any courses are added AFTER the initial billing period, I (student and guarantor) understand that it is my responsibility to contact the Office of Student Accounts (1-800-288-1144, or student.accounts@vanderbilt.edu) for due dates and amounts in order to avoid any holds and/or late payment penalties.

- I (student and guarantor) understand that in order to avoid late payment penalties, all charges must be paid by their respective due dates. Any balance not paid by the respective due date will be assessed a late fee of one and one-half (1.5%) percent per month (minimum $5.00) on any outstanding balance due each month until the amount due and the penalty is paid in full.

- I (student and guarantor) acknowledge that non-receipt of a bill or notification of an e-bill from Vanderbilt University will not result in the removal of any late fees that may accrue on the student account.

- I (student and guarantor) acknowledge that as a condition for financial clearance from Vanderbilt University to enroll in classes for subsequent sessions, all unpaid balances, including late fees, must be paid in full prior to the next enrollment period. Furthermore, I (student and guarantor) understand that the student’s transcripts and/or diploma may be withheld until the account has been paid in full.
• I (student and guarantor) understand that Vanderbilt University reserves the right to refuse to permit any further charges to my account, and further reserves the right to prohibit enrollment unless and until payment in full is made to satisfy the full balance due on my account.

• I (student and guarantor) agree to reimburse Vanderbilt University the fees of any collection agency, which may be based on a percentage, and all costs and expenses, including reasonable attorney’s fees, incurred in any collection efforts.

• I (student and guarantor) authorize Vanderbilt University and its respective agents and contractors to contact me regarding the student account, including efforts related to the collection of delinquent accounts, at the current or any future number that is provided including any cellular phone or other wireless device using automated telephone dialing equipment or artificial or pre-recorded voice or text messages.

• I (student and guarantor) authorize the crediting of all Federal Title IV funds to my student account for both direct and discretionary charges. These charges include, but are not limited to direct costs (tuition, fees, on-campus housing and campus dining plans) and discretionary charges (VU card account, health insurance, parking fees, fines, etc.). If I choose to not have Federal Title IV funds applied toward discretionary expenses, then I will contact the Office of Student Accounts to update my authorization.

• I (student and guarantor) authorize any excess funds or credit balances to be refunded to me. If the credit balance has been created by a Federal Direct PLUS (Parent) Loan fund, it will be refunded to the parent borrower. To view our Refund Policy, click here for Undergraduate or here for Graduate/Professional.

• I (student and guarantor) acknowledge that the obligation to pay this debt is jointly and severally owned by both the student and the guarantor(s) who have signed this agreement. It is also continuing in nature and applies to any and all charges incurred by the student, and shall not terminate unless written notice is sent to the Vanderbilt University Office of Student Accounts. Any guarantor(s) request to terminate this obligation shall only be granted if and when the account balance is paid in full.

STUDENT NAME ____________________________  ____________________________
            (Type or Print)                                             (Signature)

            (Last 4 Digits of SSN)  (Date)

GUARANTOR NAME ____________________________  ____________________________
            (Type or Print)                                             (Signature)

            (E-Mail Address Please print) (Last 4 Digits of SSN)  (Date)

GUARANTOR NAME ____________________________  ____________________________
            (Type or Print)                                             (Signature)

            (E-Mail Address Please print) (Last 4 Digits of SSN)  (Date)