



**TUITION DEFERRAL
PROMISSORY NOTE**

THIS FORM IS TO BE USED BY STUDENTS WHO HAVE APPLIED FOR FULL-TIME OSAP or SECOND CAREER.

Please circle one:

FULL-TIME OSAP

SECOND CAREER

STUDENT NO: _____

NAME: _____

PROGRAM: _____

PHONE NO: _____



DECLARATION:

1. Please accept this \$100.00 as my non-refundable deferral fee. I understand that this \$100 payment will be applied towards my tuition and will allow me to register in the program.
2. I understand that a deferral delays payment of tuition fees only until I receive *any funding* that I am awarded. If I do not receive Funding or the amount of Funding received is less than tuition outstanding, I am responsible to pay the balance of tuition owing immediately.
3. Receiving a tuition deferral does not guarantee that I will be eligible for any Funding.
4. If I do not receive Funding and/or decide not to attend St. Clair College, I am still responsible for payment of all fees (unless I officially withdraw from St. Clair College within the first ten days of classes).

Signature

Date