

Tuition Reimbursement Certification & Authorization

Revised 3/15/22

Submission Instructions

Once you have completed this form in its entirety, please print, sign, or e-sign, and submit to your Academic Advisor.

Academic Advisor: _____

Student Information

First Name: _____ Last Name: _____ Student ID: _____

Terms and Conditions of Tuition Reimbursement Payment Option

1. I receive employer reimbursement of at least 50% of my annual tuition costs. The University of Arizona Global Campus will defer my tuition and any applicable fees for up to 60 days from the start date of each course.
2. I authorize the University of Arizona Global Campus to charge my credit/debit card according to the terms of the Tuition Reimbursement plan. I understand my credit/debit card will automatically be charged 60 days from each course start date if the University of Arizona Global Campus has not received payment for the course tuition and any applicable fees. **I understand that I need to input my complete credit/debit card information in the Student Portal in the Finance area.**
3. The University of Arizona Global Campus will accept debit cards that are endorsed by Visa or MasterCard. I understand that it is my responsibility to ensure that I have sufficient funds in the account to avoid overdraft fees. **I understand that the University of Arizona Global Campus will not be held liable for any institutional and/or bank fees assessed for insufficient funds.**
4. Endorsed debit cards may have daily limits that cannot be exceeded. I understand that it is my responsibility to understand these limits and ensure any payments on endorsed debit cards will not exceed these limits or communicate with my bank to request an exception to these limits.
5. There may be differences in fraud protection features of debit cards and credit cards, particularly because debit card purchases are withdrawn directly from a checking or savings account. It is my responsibility to be aware of these differences prior to submitting this information as part of my payment option plan.

6. I agree to update my credit/debit card information in the University of Arizona Global Campus Student Portal if there are any changes to my credit/debit card information.
7. I understand that the terms and conditions of this agreement are not contingent upon the receipt of a grade, completion of a course, or reimbursement by my employer.
8. I understand that I am ultimately responsible for all charges incurred from the University of Arizona Global Campus and that if the terms of this agreement are not met, I will no longer qualify for a tuition deferral under the Tuition Reimbursement Plan and I will immediately comply with the terms and conditions of the University of Arizona Global Campus Cash Plan as described in the [Academic Catalog](#).

Credit/Debit Card Information

Credit/Debit Card Type: MasterCard AMEX Visa Discover

Name as it appears on credit card: _____ Expiration Date: _____

Last Four Digits of Card Number **ONLY**: _____

Acknowledgment

I have read, fully understand, and agree to the terms listed above.

I certify that I am currently employed with _____ and that I am eligible for their tuition reimbursement program.

Student Signature: _____ Date: _____

Employer Representative: _____ Phone: _____

You have provided your consent to receive documents from the University of Arizona Global Campus in electronic form as part of your Online Application. For more information, please refer to the Electronic Communication section of the Catalog.