

**Ten Month Payment Plan Enrollment Form**

**Date:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **ID Number:** \_\_\_\_\_

The 10-Month Payment Plan can only be used to cover the costs of **Tuition, Room, and Board**.  
**\*\*All other fees must be paid upfront\*\*.** Your first monthly payment is due on **July 15, 2018** and your final payment is due on **April 15, 2019**. Please include your participation fee with your first payment.  
**\*\*\*This plan must be renewed in December 2018 for the Spring 2019 term.\*\*\***  
 For additional information contact the Business Office at 318-869-5125.

**(A) Annual Expenses (Fall 2018-Spring 2019)**

**Annual Credits (Fall 2018-Spring 2019)**

Full Year Tuition \$ 36,580.00  
 Full Year Double Room \$  
 Full Year Board \$

Scholarships/Grants \$  
 Perkins Loan \$  
 Stafford Loan \$  
 Parent Loan \$

**(A) Total Expenses** \$

**Total Credits** \$

\*\*\*\*College Work-Study is not to be credited to this work sheet, it will be paid to the student in monthly pay checks; the student has the option to apply the Work-Study payments to the monthly balance\*\*\*.

**PROPOSED ANNUAL BUDGET (FALL 2018-SPRING 2019)**

(A) Total Expenses \$  
 (B) Less Total Credits \$  
 (C) Budgeted Total \$

**(D) Your Monthly Payments** \$ **Budgeted Total (C) divided by 10**

Monthly Payments (D) \$  
 Participation Fee \$ \$10.00 by July 15th / \$80.00 After July 15th  
 Parking Decal \$ \$100.00 Resident/\$60.00 Commuter  
 New Student Fee \$ 250.00 \$250.00 New Students ONLY  
 Room Deposit \$ 50.00 \$50.00 New Students ONLY  
 Less Enrollment Deposit \$ (250.00) (\$250.00) New Students ONLY  
**TOTAL FIRST PAYMENT** \$ **July 15, 2018 Payment**

**ALL PAYMENTS ARE DUE ON THE 15TH OF EACH MONTH.** A monthly finance charge, equal to 1% of balance will be added if payments are not received by due dates.

Make checks payable to Centenary College and mail to:

**Centenary College Business Office**  
**2911 Centenary Blvd**  
**Shreveport, LA 71104**

Please write Student's Name on All Check Payments.

<b>IF YOU WISH TO PAY BY CREDIT CARD</b>		
(circle one):	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express	<input type="checkbox"/> Charge Initial Payment Only <input type="checkbox"/> Charge Monthly
Account Number	Exp Date	Signature of Cardholder