**BURSAR PAYMENT WORKSHEET**  
UNDERGRADUATE STUDENT - SUMMER SESSION 2018

Worksheet MUST be signed and returned by **MAY 18th** if your payment amount differs from the amount on your invoice. Please return via FileSender at [http://financeadmin.lehigh.edu/bursar or fax 610.758.3033](http://financeadmin.lehigh.edu/bursar or fax 610.758.3033) or mail to Office of the Bursar, 27 Memorial Drive West, Bethlehem, PA 18015-3093.

Last ___________  First ___________  LIN ___________

Daytime Phone __________________________ Email __________________________

<table>
<thead>
<tr>
<th>Adjustment Description:</th>
<th>Amount:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Enter the &quot;TOTAL DUE&quot; from your invoice.</td>
<td></td>
</tr>
<tr>
<td>2. Additional tuition for late registration after billing period (if not on invoice)</td>
<td></td>
</tr>
<tr>
<td>3. Add Summer On Campus Housing (if not on invoice)</td>
<td></td>
</tr>
<tr>
<td>4. Add Summer Meal Plan and/or GoldPLUS (if not on invoice)</td>
<td></td>
</tr>
<tr>
<td>5. Less: Second Summer Session (Classes Start 7/2/18) <strong>Payment Due 6/29/18</strong></td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:** Co-Op students are not eligible to deduct second summer session. Entire balance is due May 18, 2018.

6. **Adjusted Total Charges** (lines 1 through 5)

7. **Less Loan applications completed but not yet disbursed:**
   - Federal Direct Loan (Multiply by .989 to determine amount disbursed)
   - Federal Direct Parent Loan (PLUS) (Multiply by .957 to determine amount)
   - University Tuition Loan
   - Other: Please specify name:

8. **Less other credits:**
   - Tuition 529 Savings Plan Account Distribution
   - Work Study may not be used as a deduction. Funds must be earned by the student as an hourly wage.
   - Pell Grant
   - Other: Please specify name:
   - Other: Please specify name:

9. **Total Deferred Amount for Pending Credits** (add lines 7 and 8)

10. **AMOUNT REMITTED:** by **May 18th to avoid $200 late payment fee**  
    (Adjusted Total Charges less Pending Credits: line 6 minus line 9)

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**REQUIRED SIGNATURES**

A parent or guardian and the student must sign this form.

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Student Signature ___________________  Date ___________________  Parent/ Guardian Signature ___________________  Date ___________________

My/Our signatures above acknowledges the Deferred Amount constitutes a loan made by Lehigh University to me. This loan shall be paid to Lehigh University immediately upon receipt by the Student of the funds anticipated from the indicated source(s). If the anticipated funds are not received by date specified, this loan shall be repaid by Student to Lehigh University, on demand together with interest at 6% per annum. I authorize Lehigh University to obtain credit report(s) as needed to administer the issuance and collection of this loan. I acknowledge this loan shall constitute a “student loan” and shall not be discharged or dischargeable in any proceeding filed under the United States Bankruptcy Code. The academic records of the student are subject to be closed until I have satisfied all the requirements of this agreement. In the event of failure to repay this loan, I agrees to pay collection fees up to 33 1/3% of the unpaid Deferred Amount.

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Office Use Only: **Date Received**  
Cleared for Registration by **