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SAMPLE

CONSERVATIVE THEOLOGICAL UNIVERSITY

12021 Old St. Augustine Road Jacksonville, FL 32258 Phone (904)-262-8275

1-800-GO-BIBLE (Admissions Only)

Application for Finance Agreement (Please Print or Type)

Student Information

Student ID# (SS#)		Date:				
Degree Level: Institute	Associates	Bachelor	Masters	Doctoral		
Name (last, first, middle) : _						
Home Address						
City			State		Zip Code	
Current Mailing Address (if	different from abo	ve)				
City			State _		Zip Code	
Home Phone ()		Messaç	ge Phone ()		E-Mail	
Check here if this is a new a	address or telepho	one number.				

Please Read Carefully:

The Alternative Payment Plan allows the student to contract with the University for regular payments toward tuition only, to defer full payment at the time of registration. A one & one half (1 1/2%) service charge on the balance is assessed monthly by the Seminary.

I request CTU to finance a total \$ for my Associate; Bachelor; Masters: D account with balances not in accord with this agreement or unpaid monthly payments.	octoral level studies. Academic hold shall be placed on any				
Minimum monthly payments must be at least \$100.00 for Undergraduate level student Doctoral level students. Payments must be made by check or money order. Actual paymetime. 1,	ent amount is determined by amount financed and length of				
payment plan for my tuition expenses in order to defer full payment at the time of registra	ation:				
MINIMUM PAYMENT: I agree to pay each month the amount of \$	until current tuition contract is paid in full.				
PAYMENT DUE DATE: (Day of the month upon which payment will be made) _	1st or 15th (circle one)				
BEGIN DATE: (The date on which payments will begin. Must be 30 days of Registr	ation)				
NOTICE: A separate financial, term payment contract must be	signed with this agreement.				
Student Signature:	Date:				
CTU AUTHORIZED APPROVAL SIGNATURE					
SIGNATURE: PO	SITION:				
DATE: FILE:					
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"Conservative in Theology... Creative in Training"