



## VETERANS DEFERMENT

NAME \_\_\_\_\_

ID# \_\_\_\_\_

ADDRESS \_\_\_\_\_

VA PROGRAM \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

On or before \_\_\_\_\_ I promise to pay Daytona State College the sum of \_\_\_\_\_  
for my Veterans Deferment for the \_\_\_\_\_ semester.

### TERMS OF THIS LOAN:

1. I understand only the charges I am currently responsible for will be covered by this agreement. **I understand I must update this deferment at the Office of Student Accounts if any schedule changes increase my outstanding charges.** If I do not update this deferment I understand my additional classes will be canceled for non-payment. Initial \_\_\_\_\_
2. Withdrawal from one or all courses after the last date to drop with a refund will NOT cancel or reduce this deferment. If I withdraw from all my courses this deferment will become due and payable immediately. Initial \_\_\_\_\_
3. I understand that after the official last date to drop courses with a refund a HOLD will be placed on my records until this deferment is paid in full. Diplomas, transcripts and future registration activity will not be permitted until this deferment is paid in full. Initial \_\_\_\_\_
4. I authorize the College to deduct any remaining balance from the first available cash refund or financial aid refund to satisfy this loan. Financial Aid includes any Federal, State, Institutional, or external assistance the borrower may receive for attendance at Daytona State College. Initial \_\_\_\_\_
5. I understand if my Veterans benefits do not cover the entire cost of my tuition and fees I am responsible for payment of any balance not covered. Initial \_\_\_\_\_
6. If I do not pay this loan in full, I understand this loan (along with appropriate personal information including SSN) may be referred to an outside collection agency and to the credit bureaus. I agree to reimburse the College for all collection costs, including attorney's fees that may be incurred to collect this loan. Initial \_\_\_\_\_

**By my signature below, I acknowledge that I have read, fully understand, and agree to all terms and conditions of this loan.**

Student's signature \_\_\_\_\_ Date: \_\_\_\_\_

Staff Authorization \_\_\_\_\_ Date: \_\_\_\_\_