



**DMIN PARTNERSHIP REGISTRATION SP19**

Register in person, by mail, fax, or attached scan to  
 St. Mary's Ecumenical Institute, Attn: Registrar  
 5400 Roland Avenue, Baltimore, MD 21210-1994



E-mail: pthigpen@stmarys.edu

Fax: 410/864-4205 (Contact the Registrar if you don't receive email confirmation within 3 days.)

**Student Information**

**NAME:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

Please complete the following only if any of the information has changed:  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Baltimore City  Baltimore County  Anne Arundel  Harford  Howard  Other: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Do you need any accommodations in order to participate in the E.I.? YES  NO  (If yes, you will be contacted by the Registrar.)

**Course Information**

PT862	Reading Scripture	\$1,980	\$100	\$2,080
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**Payment Information**

**Payment in Full** **Amount Paid:** \$

**Deferred Tuition Payment Plan:** Initial minimum payment of \$100 is due at time of registration, with monthly payments deducted automatically from the credit account provided on the first day of each month. Students must provide a credit card or debit/credit card for automatic drafting and sign the agreement contract below.

Amount Due at Registration	Term of Payments	Monthly Payment Amount
\$100	4 Months (1/1, 2/1, 3/1, 4/1/19)	\$495

<b>Amount Being Paid:</b>	
(Please refer to Course Selection for Minimum Payment Due)	
<b>Remaining Balance Due:</b>	

Pay by credit card or by check payable to *St. Mary's Seminary & University.*  
 VISA  MasterCard  Discover  Amex  Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Expiration \_\_ / \_\_ / 20\_\_ Security Code \_\_\_\_ Name \_\_\_\_\_

**For Deferred Payment Plan:** I authorize the use of the credit account provided for withdrawal of funds on the scheduled dates listed above. By signing I attest that I have read, understood and agree to the terms and conditions stated on the second page of this form.  
**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Directory Waiver Information**

**Directory Information Waiver:** My selection and signature below acknowledge that I have read St. Mary's FERPA Directory Information Policy at <http://www.stmarys.edu/eidip>.

**CHECK ONE:**  **YES, release my directory information.**  **NO, do not release my directory information.**

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**FOR OFFICE USE ONLY:** New: \_\_\_\_\_ Student ID#: \_\_\_\_\_ Checked: \_\_\_\_\_ Confirmation Sent: \_\_\_\_\_  
 Parking Tag #: \_\_\_\_\_ Initials: \_\_\_\_\_ Date Registered: \_\_\_\_\_

### Deferred Payment Plan Policy

- I have chosen to participate in the deferred tuition payment plan offered by St. Mary's Ecumenical Institute.
- I understand that I am responsible to pay full tuition less any scholarships, financial aid or other awards I have received for this program. If more than the minimum deposit is paid and/or other financial awards apply, then I will be notified by email of my recalculated automatic monthly payment obligation.
- I understand that it is my responsibility to remain aware of obligations to the University and to ensure sufficient funds are in the credit account used for automatically deducted payments on the day that is due.
- I understand that there is a \$30 late fee when payment is rejected due to insufficient funds.
- I understand that if I fail to make payments as scheduled, a hold will be placed on my records until my tuition and late charges are paid in full.
- I understand that failure to make payment on a delinquent account may result in collection action. I understand that the University has the right to pursue litigation against me if I become past due. In addition to the balance owed, I am obligated to pay reasonable collection fees, as permitted by law. I also agree that the University may retain all transcripts, awards, degrees and records to which I would otherwise be entitled.

### Ecumenical Institute Tuition Reduction and Refund Policy for the DMin Level Programs

Students who withdraw from a course are required to fulfill their financial obligations for the course. The schedule printed below lists the deadlines by which an *official written and signed Change of Course Status form* ([available online](#)) **must** be received by the Registrar in order for the student to be eligible for the corresponding percent of reduction in tuition:

DMin Foundational Courses	
Time of Official Withdrawal	Amount of Tuition Reduction
Before class 2/7/19	100%
2/8/19	67%
3/7/19	33%
After 3/8/19	0%

The University reserves the right to require full tuition payment for students who have been administratively withdrawn or otherwise officially terminated from the program.