



Student Accounting Services · Blumenthal Hall 3<sup>rd</sup> Floor · Room 306  
249 University Avenue · Newark, NJ 07102

**THIRD PARTY TERM BILL PAYMENTS**

**PROMISSORY NOTE:** To be completed each term by a student requesting a deferment from paying because Employer will pay the student's semester charges. The student must submit, an original letter on official letterhead with the following information:

Full Name of Student: \_\_\_\_\_ RUID#: \_\_\_\_\_

How much is being paid:\$ \_\_\_\_\_ Semester \$\$Paid For \_\_\_\_\_,20 \_\_\_\_\_

Address Check to be mailed: Rutgers University  
249 University Avenue, 3<sup>rd</sup> Floor Blumenthal Hall  
Newark, New Jersey 07102

Name of Employer: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

NAME OF APPROVER FOR THIS PAYMENT: \_\_\_\_\_

Phone # of Approver: \_\_\_\_\_

Email Address of Approver: \_\_\_\_\_

\_\_\_\_\_  
Print Student's Full Name                      RUID #                      CELL PHONE #                      EMAIL ADDRESS

The student must read and sign this sheet:

This is a **Promissory Note** acknowledging my indebtedness to Rutgers, The State University of New Jersey.

I hereby acknowledge my indebtedness owed to Rutgers University in the amount of \$ \_\_\_\_\_ for Fall/Spring/Summer/Winter 20\_\_\_\_ semester. My payment is due by \_\_\_\_\_.

I understand that Rutgers University is giving me a temporary clearance for my semester charges because I have submitted documentation from my Employer indicating payment of these charges now or upon receipt of my grades after the semester is over. I have till 30 (thirty) days after the end of the semester to ensure that payment has been sent by my Employer. I agree to immediately pay any full outstanding charges that have not been paid by my Employer after this time. I understand that I am responsible to pay any outstanding balance plus accrued interest, penalty and attorney fees for collection and collection costs when any amount is not paid as I am in default according to the terms of this agreement. I understand that I am under obligation to notify Rutgers University immediately if my employment changes or the terms of my company's tuition payment program change.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

Witnessed By:

\_\_\_\_\_  
Student Accounting Representative

\_\_\_\_\_  
Date