

EXTENDED PAYMENT AGREEMENT

Student Name: _____

Student/SPIRE ID: _____
(8-digit ID number)

INSTRUCTIONS

Please read the terms of this agreement carefully before signing. Completed forms may be sent by email to kfawcett@admin.umass.edu.

SUMMER 2nd 6 Week Session: the deadline to submit this form is July 10, 2026.

CERTIFICATION of ELIGIBILITY and PROMISSORY NOTE

- I certify that I am enrolled in the Isenberg Graduate Program at the University of Massachusetts Amherst and that I am qualified to receive tuition reimbursement benefits from my employer for the semester for which I am submitting this application. This can be verified by contacting:

_____ at (____) _____ - _____ of _____.
(name of supervisor or HR representative) (contact's phone number) (name of employer)

- I promise to pay the University of Massachusetts the amount listed below no later than the Extended Payment Due Date listed below.
- I understand that payments or loan disbursements received before the Extended Payment Due Date will be applied directly to any outstanding balance on my account, thereby reducing the amount to be paid on the Extended Payment Due Date. I understand that there will be no refund issued to me unless there is a credit balance on my student account.
- I understand that the University of Massachusetts reserves the right to declare the total balance under this note (adjusted as necessary based on the university's refund policy and by payments applied to the account) immediately due and payable if I withdraw, if I am suspended, or if I am dismissed.
- I understand that if I participate in this plan for my last semester prior to graduation, the University of Massachusetts will hold my diploma and official academic transcripts until the final payment is received.
- I understand that the University of Massachusetts reserves the right to deny enrollment in this plan to any student who misrepresents his/her eligibility for company-sponsored tuition reimbursement benefits, or who does not meet the Extended Payment Plan enrollment or payment deadline.
- In the case of non-payment, the University of Massachusetts has the right to assess a late payment fee and the student will be Administratively Withdrawn from the university; grades and transcripts will be withheld, registration in future semesters will be prohibited as will participation in commencement activities. Any unpaid balance may also be submitted for collection action which may include collection agency fees up to 35% and intercept of state tax refunds.

SCHEDULED PAYMENT

Fees associated with the Summer Session 2 semester will be due no later than the due date listed below.

Term Balance:	
Due Date:	October 4, 2026

SIGNATURE

I hereby certify that I have read, understand and agree to the terms and conditions as stated above.

(Signature)

(Date)

(Email Address)