



# JOHN CABOT UNIVERSITY

## Payment Deadline Extension Request Form (PDERF)

**TO BE COMPLETED BY HOME SCHOOL COUNSELOR or FINANCIAL AID OFFICE**

Student's Name:	<input type="text"/>	Home Institution:	<input type="text"/>
Semester Enrolled:	<input type="text"/>		<input type="text"/>

This form is used to set up a payment schedule for students receiving federal and/or institutional aid that is disbursed after the JCU payment deadline. By filling out and submitting this form, payments are not automatically deferred; students must receive acceptance notification from JCU to guarantee approval. **IMPORTANT:** The \$500 tuition deposit and \$1,000 housing deposit (if applicable) cannot be postponed in anticipation of your transferrable financial aid.

### STEP 1: STUDENT AID INFORMATION

<i>TITLE IV PROGRAMS</i>	Amount	Disburse Date	<i>OTHER AID</i>	Amount	Disburse Date
Stafford Subsidized	<input type="text"/>	<input type="text"/>	Private Loan	<input type="text"/>	<input type="text"/>
Stafford Unsubsidized	<input type="text"/>	<input type="text"/>	Scholarship	<input type="text"/>	<input type="text"/>
PLUS Loan	<input type="text"/>	<input type="text"/>	JCU Aid	<input type="text"/>	<input type="text"/>
Pell Grant	<input type="text"/>	<input type="text"/>	GI Bill	<input type="text"/>	<input type="text"/>
Other Federal Aid	<input type="text"/>	<input type="text"/>	Other Aid	<input type="text"/>	<input type="text"/>
<b>TOTAL</b>	<input type="text"/>		<b>TOTAL</b>	<input type="text"/>	

### STEP 2: PAYMENT DEADLINE CALCULATION

To calculate the deadline to transfer financial aid to JCU, add 10 business days to latest disbursement date from fields above:

**Please indicate who will send payment to JCU: Student -or- Home Institution (Circle One)**

### STEP 3: COUNSELOR SIGNATURE

By signing, you hereby certify that all information provided here above is true and accurate.

Counselor Name \_\_\_\_\_ Counselor Title \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_

### STEP 3: STUDENT STATEMENT OF PROMISE TO PAY **STUDENT SIGNATURE REQUIRED**

I, \_\_\_\_\_, understand that **I AM RESPONSIBLE** for making full payment of all Program Fees (tuition and/or housing) to John Cabot University by the deadline specified above in **STEP 2**, and acknowledge a penalty will be applied for any payment after that date.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this completed form to the JCU Office of Financial Aid at [financialaid@johncabot.edu](mailto:financialaid@johncabot.edu).