SIMPSON COLLEGE CONTINUING & GRADUATE STUDENT EMPLOYMENT REIMBURSEMENT LOAN

Continuing and graduate students may sign a promissory note to defer payment of the tuition amount that will be reimbursed by an employer until 45 days after the semester ends. To be eligible for deferred payment, the following promissory note and a signed Employer's Approval letter must be submitted to the Business Office before the first class. That portion of tuition not reimbursement by the student's employer (employee portion) must be paid within 30 days of assessment. If the employer reimbursement is paid within 45 days of the semester ending and the employee portion is paid within 30 days of initial assessment, finance charges will be waived. However, if there is any delinquency on the account, finance charges will be assessed on the entire unpaid balance at a daily rate of 0.05% (18% A.P .R.) which will be assessed on the last day of each calendar month until the balance is paid in full.

Note: This form no	eeds to be con	be completed each semester.					
Address:		Student ID #:					
II. (G II N					W. 1 D		
Home/Cell Phone:		T. 1 T.				one:	
Term: (Circle all that appl				Term 3	Term 4	Summer X, 1, 2, 3, 4 (Circle all that apply)	
TOTAL TUITION CHAR				over re-			
EMPLOYEE PORTION: Employer's Name:	\$		EMPL	EMPLOYER REIMBURSEMENT \$			
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		PR	ROMISSO	RY NOT	ГЕ		
						mise to pay to the order of SIMPSON	
						lowa, the sum of	
						vithin 45 days of the semester ending, the	
						at a daily rate of 0.05% (18% A.P .R.) on	
						s received. Principal and interest not paid	
						aid balance which will be assessed on the	
						ment and any balance shall be applied or	
						ant then unpaid shall become immediately	
						rees to pay all costs and expenses incurred	
						, including, but not limited to, reasonable	
						nand of payment, notice of non-payment	
						sions of this note, and consent the time or	
	• •	•			•	ime to time, without notice.	
						AGREEMENT SHOULD BE READ	
						NFORCEABLE. NO OTHER TERMS	
						CONTRACT MAY BE LEGALLY	
	MAY CHANG	GE THE TE	RMS OF T	HIS AGI	REEME	NT ONLY BY ANOTHER WRITTEN	
AGREEMENT.							
Borrower acknowled							
			by my emp	loyer for	these tui	tion charges, I hereby authorize financial	
information to be rele	ased to said em	ployer.					
Signature					Date	********	
*****	* * * * * * * * * *	* * * * * * * * *	*****	* * * * * *	* * * * * *	* * * * * * * * * * * * * * * * * * * *	
RETURN TO:	Simpson Colleg	ge	OR	Simpsor	n College		
	Attn: Business				es Moines (Campus	
	701 N C St				28th St., Ste		
	Indianola IA 5	0125		West De	es Moines I	IA 50266	
	Phone: 515-96	1-1269		Phone:	515-309-30	099	
		61-1498 Attn: De		FAX:	515-961-1	.887	
	Email: denise.	hudson@simpso	n.edu				