Dear MBA Student,

Thank you for your interest in the Loyola University Chicago Employer Reimbursement Plan (ERP) for students in the MBA Program. There are separate applications for the Health Care Management MBA, Executive MBA and Intercontinental MBA programs.

The Employer Reimbursement Plan is designed to enable Graduate Business students who are eligible for tuition reimbursement from their employer to defer payment of those tuition and fees covered under their employer agreement. The application fee is $100.00 per term. You must re-apply each term and pay the application fee each term you want to participate in the ERP program.

**NOTE: All non-deferred tuition and fees are due at the time of application.**

For example, if your employer will pay 90% of tuition and fees, that is the amount of tuition and fees we will defer through the ERP. The remaining 10%, along with the $100.00 application fee, will be due with the application.

The only exception to prepaying non-deferred tuition and fees at the time of application would be for students who borrow funds. **HOWEVER, note that to be eligible for an ERP, students may only take out loans up to the amount the employer does not pay.** Loans are posted directly to the student account to cover the non-deferred cost first. Therefore, the amount of the loan should not exceed the non-deferred tuition and fees. For example, if your employer pays 80% of tuition, the loans should only cover 20% which is the amount your employer does not pay.

Deferrals are based on the following schedule: **Late forms are not accepted.**

<table>
<thead>
<tr>
<th>Term</th>
<th>Enrollment Period Begins</th>
<th>Enrollment Period Ends</th>
<th>Payment Due</th>
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<td>Fall</td>
<td>07/01/2015</td>
<td>08/27/2015</td>
<td>12/05/2015</td>
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<tr>
<td>Winter</td>
<td>10/20/2015</td>
<td>11/10/2015</td>
<td>03/05/2016</td>
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<td>Spring</td>
<td>02/01/2016</td>
<td>02/24/2016</td>
<td>06/05/2016</td>
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<tr>
<td>Summer</td>
<td>05/01/2016</td>
<td>05/19/2016</td>
<td>09/05/2015</td>
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To apply for ERP, please submit:

- The completed Deferred Tuition Agreement form
- A copy of your employer’s reimbursement plan
- The $100 application fee – cash or check only
- Cash or check for any non-deferred tuition and fees

By mail or dropped off at one of the following Office of the Bursar locations:

- **Sullivan Center 190**
  1032 W. Sheridan Rd.
  Chicago, IL 60660

- **Corboy Law Center lobby, Bursar Office**
  25 E. Pearson
  Chicago, IL 60611

If you have any questions about the ERP, please contact the Office of the Bursar at (773) 508-7705 or email to bursar@luc.edu.

Sincerely,

Sergio Ortiz
Office of the Bursar
773-508-7154
Deferred Tuition Agreement

2015-2016 TO BE COMPLETED BY STUDENT: Please check the appropriate term. Late forms are not accepted. Please submit a new form each semester

<table>
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I agree to all of the terms and conditions set forth in this agreement (listed below) and I am aware that if my employer does not pay by the Payment due date, I am liable to pay the balance owed in full at that time. The application is void if required sections are not initialed.

Under the terms of this deferred tuition agreement:
1. I have paid in full all non-deferred balances from prior terms. Initial here:
2. I agree I can only take out a student loan to cover the amount my employer does not pay. Initial here:
3. I agree to pay my tuition account in full no later than the due date even if I have not completed my course(s), or reimbursement has not been issued by my employer. Initial here:
4. I understand this deferment covers only that percentage of the tuition and fees that is being paid by my employer. All other charges are due at the time of application. Initial here:
5. I understand that if my account is not paid when due:
   a. A late payment fee of 1.5% will be assessed monthly on the past due balance. Initial here:
   b. I will be unable to receive University services and register for future terms. Initial here:
   c. My account may be referred to collections, reported to a credit bureau, and charged with collection costs. Initial here:
   d. I will be ineligible to participate in the ERP plan for future terms. Initial here:

Enclosed is my $100 non-refundable application fee (cash or check only) and payment in full for any non-deferred charges for the term indicated. All applications will be denied if incomplete, received without appropriate payment or after the deadline.

Student Signature _______________________________ Date ____________

Student Name ___________________________ Student ID Number ____________________________

(Please print)

Permanent Address ___________________________ Loyola E-mail ____________________________

Street ___________________________ City ___________________________ State __ Zip

Telephone Number ___________________________ Business E-mail ____________________________

Total Balance for This Term ____________ Total Balance Employer Will Pay ____________ Total Anticipated in Loans ____________

Bills and grades are issued to the student only. It is the responsibility of the student to provide their employers with copies of any documents their employer may require. The University does not accept responsibility for delays in the U.S. Postal System. Please return application to the Office of the Bursar at either address below. You will be notified only if your application has been denied.

TO BE COMPLETED BY EMPLOYER:
I hereby certify that (employee name) ___________________________ is employed at Loyola University Chicago ___________________________

Business Name ___________________________ Address ___________________________ City ___________________________ State __ Zip

and is eligible to participate in the employee tuition reimbursement program.

Maximum dollar amount or percentage paid for this term under the reimbursement plan ___________________________

Terms and conditions of repayment ___________________________

Name of Business Representative ___________________________ Title ___________________________

Signature ___________________________ Date ___________________________ Telephone Number ___________________________

Random audits may be conducted by the University to verify the employment information you have provided.

Return a copy of your employer’s reimbursement plan, fees, and application to one of the following locations by the specified deadline.

OFFICE USE ONLY:

Loyola University Chicago Loyola University Chicago OFFICE USE ONLY:
Office of the Bursar Office of the Bursar Date:____________________ Term:____________________
Sullivan Center 190 Lobby, Student Services Center Tuition:____________________ Fees:____________________
1032 W. Sheridan Rd. 25 E. Pearson Amount Deferred:____________________
Chicago, IL 60660 Chicago, IL 60611
Telephone: (773) 508-7705 Email: bursar@luc.edu