Method of Payment Selection Form

We need to know by **July 31, 2020** how you intend to take care of the balance due on your account. **If we don’t hear back by then, you may be placed on hold and be unable to confirm your class registration at the start of the semester.** You may also be subject to a $50 late fee.

Please print and complete this page and return it by e-mail to [accounting@earlham.edu](mailto:accounting@earlham.edu), by fax to 765-983-1444 or by mail to Earlham College Accounting Office, Drawer #201, 801 National Rd West, Richmond, IN 47374.

Student Name: ___________________________________  ID#: _________________________

Method of Payment:

A. _____ **Payment in Full**—complete each applicable part below:
   - _____ I will send $___________ by August 3, 2020
   - _____ I will be getting an outside scholarship or loan for $___________ from ______________________
   - _____ I will be sending a 529 Plan payment of $___________
   - _____ Other (explain) _________________________________________

B. _____ **Nelnet/TMS Monthly Payment Plan**—select one below:
   - _____ I have already enrolled with Nelnet/TMS, or
   - _____ I will enroll with Nelnet/TMS by August 3, 2020

C. _____ **Deferred Payment Plan**, and I have sent ½ the balance due by July 31.

Signature: _________________________________________  Date: _____________________