



EMPLOYER REIMBURSEMENT FORM

Seattle Pacific University (SPU) is pleased to offer a program that defers the payment due day for student account charges covered by the student's employer. Payment is due approximately 30 days after the quarter ends.

Student Name: _____ SPU ID Number: _____

Employer: _____

Employer Address: _____

Contact Person: _____ Contact Phone: _____

Contact Email: _____

My signature below certifies that I have read and understand the following:

- If I do not receive the reimbursement that I anticipated from my employer, I will be responsible for the student account balance including late fees (1.25 percent monthly) and collection costs.
- If my student account is past due, a hold will be applied and I will be unable to register or receive an official academic transcript until my account is paid in full.
- If my employer requires that a course fulfil a degree requirement, it is my responsibility to confirm with SPU's Student Academic Services and my employer's responsibility to list the specific course(s) in the employer letter submitted to Student Financial Services (SFS).
- I am required to submit a new Employer Reimbursement Form and letter from my employer on employer letterhead to SFS at least once per year to include the following:
 - Student name
 - SPU ID number
 - Dates of coverage
 - Amount of coverage

Student Signature: _____ Date: _____

Return this form, along with the letter from your employer to Donna McLynne at the address above.

Questions? Contact Donna McLynne at dmclynne@spu.edu 206.281.2069