

Please complete items 1-4 below and return to Doane College Business Office, 1014 Boswell, Crete, NE 68333.

**1. Student Name:** \_\_\_\_\_ **Student ID#:** \_\_\_\_\_

**2. Meal Plan Options (select only one)**

(Option A is included in your billing, if living on campus. Please verify, or select another option here.)

\_\_\_ **A. 21 Meals per week** (this is the default plan **included in your billing** - \$4.292)  
7 days/week, 1 breakfast, 1 lunch, 1 dinner per day.

\_\_\_ **B. 21 Meals anytime** (additional \$70 per semester - \$2,367)  
21 meals per week, anytime.

\_\_\_ **C. 14 Meals per week anytime** (provides a \$65 credit to the base plan - \$4.227)  
14 meals per week, anytime.

\_\_\_ **D. 10 Meals per week anytime** (provides a \$100 credit to the base plan - \$1,; 87)  
10 meals per week, anytime.

\_\_\_ **E. 5 Meals per week anytime** (\$822 per semester, only for off-campus students)

The above plans are governed by the following rules: (1) No changes to meal plans can be made after Ugr vgo dgt 9, 2012. (2) All intercollegiate athletes must choose either the 21 Meal or the 21 Meal anytime plan during the season. (3) Meal IDs are not transferable and must be presented to dine.

**3. Account Payment Options (select only one)**

(If your statement shows a balance due, please select one option below to indicate how you will pay.)

\_\_\_ **A. Pay account in full**, include a check payable to Doane College along with this form (or pay online at [wa.doane.edu](http://wa.doane.edu), click on “View your account/make a payment”, and “Make Payment”). Parents will need students to give them access to the account, see “Important!” below.

\_\_\_ **B. Payment plan**, available via WebAdvisor at [wa.doane.edu](http://wa.doane.edu). Log in, then click on “FACTS/NBS payment plan”. For parents, see “Important!” below. Spread your payments over the semester for a one-time fee of \$25. For this semester plan, enter the balance due from your statement enclosed but remember to add an estimate for books if your student will charge these to their account.

\_\_\_ **C. Promissory Note**, complete and sign the promissory note on the next page below. This will need to be paid in full by Qevqdt 15, 2012, either with a check, or online at [www.doane.edu/facts](http://www.doane.edu/facts), (click on “Crete campus students”, choose “pay in full”).

**4. Parent/Authorized Party:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Important!**

In order for parents/authorized parties to see the student account bills online and/or make payments, students need to login to WebAdvisor at [wa.doane.edu](http://wa.doane.edu) to grant access. Select “View your account/make a payment”, and then “Authorize Payers”. Online bills are the exclusive format to receive bills from Doane College.

D O A N E

C O L L E G E

**Complete this Note only if you selected Option C** above under “Account Payment Options”. Include student name, social security # or Doane ID, and the amount you owe (per your statement), and sign as Maker below.

**PROMISSORY NOTE**

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
SS# or Doane ID#

For Value Received, the undersigned, as Maker, promises to pay to the order of Doane College, Crete, Nebraska, on **October 15, 2012**, or upon demand as hereinafter provided, the sum of \$\_\_\_\_\_, which principal sum represents the balance of Maker’s student account with Doane College as of this date.

It is agreed that if the entire principal balance due on Maker’s student account as reflected above is not paid by said date, a late fee of \$15 per month shall be due and payable by the Maker to Doane College until such time as both the principal amount and the late fees are paid in full and received by Doane College. Provided, however, that if the College receives payments by or on Maker’s behalf on a monthly basis from work grants, Social Security or Veteran’s Administration payments, which are applied to reduction of the amount due and owing upon Maker’s student account and this note, then, in that event, a late fee will not be charged upon said amounts received from said sources and the principal due upon this note shall be adjusted accordingly.

In the event that the College or other legal holder of this note determines that it is insecure for any reason then this note shall be payable in full, together with any late fees, upon demand in writing served upon the maker of this note either personally or by depositing the same in the regular United States mail, postage prepaid at Crete, Nebraska. In the event that demand is made by the College or other holder of this note under the provisions of this paragraph then the entire principal sum and any late fees shall be due and payable immediately by the Maker subject to the provisions of the paragraph set out immediately above.

It is understood and agreed by the Maker that this note is given for payment of the balance of the Maker’s student account with Doane College. In the event that the Maker withdraws, leaving the College, terminating Maker’s enrollment therefrom, whether before or after the due date of this note, the entire principal amount and any late fees shall become due and payable immediately, but provided that the principal amount attributable to current semester tuition, fees, room and board, will be adjusted to reflect the following refunds:

- Tuition and fees:
- |  |                           |
|--|---------------------------|
| 1-10 days.....full refund  | 11-21 days.....50% refund |
| 22-28 days.....25% refund  | 29-35 days.....10% refund |
| After 35 days no refund  |                           |
| Room: Not refundable   |                           |
| Board: Refunded based on the number of days attended divided by number of days in the semester |                           |

It is further agreed that in consideration of the privilege of making the deferred payments upon the Maker’s student account as provided herein, that none of the Maker’s credits with Doane College shall be released **nor a transcript** or information provided to the Maker or any other institution of higher education until this note is paid in full.

The Maker acknowledges a receipt of a copy of this instrument.

\_\_\_\_\_  
Date

Doane College by:\_\_\_\_\_  
Signature Lender

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature-Maker (Parent or Student)  
(Students under the age of 18 must have a parental co-signature.)