

Student Accounts 2100 16th Ave S

Great Falls, MT 59405 (406) 771-5129 • (406) 771-4315

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PAST DUE PAYMENT PLAN AGREEMENT

Date:	ID#:	· · · · · · · · · · · · · · · · · · ·	TELEPHONE:	
STUDENT NAME: _			Te	rm year:
PO Box or Street	t Address:			
City:		State:	Zip:	
student debt amount in full in accordance future registration. Great Falls College under 18 at the time of the agreed upon that this account pure collection is required limited to collection Great Faccollection Great Faccollege may withhout the student according to the s	int of \$ is be with this payment a and /or the ability to a see MSU Student Service with a you sign this form, amount is not paid in a gency fees and attalls College MSU will hold all academic transpount is paid. At such a disclose the facts colons. In case of bankrounpaid amount as an apaid online at www.gf Mail payments to: Gr Some service with the account is read and if the account is read an	paid in full. Great lagreement prior to the add or drop a class ces Office of any chapton must provide a accordance with the harges may be turn individual agrees to orney fees. It is also no longer allow paysocripts, diplomas, a time that this payment is students account. The efferred to a commencerning the default uptcy the above native ducational loan extended in Banna and the eat Falls College Manager and the student Accounts and 100 16th Ave S reat Falls, MT 594	Falls College Manage of a (es). It is the release of a (es). It is the renange of address a guarantor. This contract, the ned over to a coopy all additions agreed that is ment agreement and block all region at along with all contract along with all contract and the collection at along with all con	SU requires that the balance be paid transcript or Diploma or a hold for sponsibility of the student to notify a or telephone number. If you are above named individual understands ammercial collection agency. If all costs of collection, including but not this account is turned over for ats with above named student. The stration capabilities until the balance has been fulfilled the accounts agency for collection, Great Falls other pertinent information to credit anderstands that Great Falls College are education and the balance will not a Please use your last term attended.
Signature:			_ Date: _	
Monthly Paymen	t Agreement Amour	nt: \$	_ Date:	
Processed by:			Date:	