



Credit Card Authorization Form

Student Accounts Office

800-999-1959 extension 8760
studentaccounts@lesley.edu

Name: _____ ID/SSN: _____

Circle Card Type: American Express Discover MasterCard Visa

Credit Card Number: _____ Expiration Date: _____

Amount to charge: \$ _____

Cardholder Signature: _____ Telephone: _____

Return with registration form to: Lesley University, 29 Everett Street, Cambridge, MA 02138 FAX: 617-349-8717. If you have questions regarding your student account, please contact the Student Accounts Office at 800-999-1959 extension 8760 or via email at studentaccounts@lesley.edu.

Bank debit cards typically have a daily withdrawal limit. Please check with your bank regarding your debit card daily limit. Should your card payment be declined, you will be charged a Declined Credit Card Fee.

DEBIT CARD PAYMENTS

Bank debit cards typically have a daily withdrawal limit. Please check with your bank regarding your debit card daily limit. Should your card payment be declined, you will be charged a Declined Credit Card Fee.

REFUNDS OF TUITION AND FEES*

The following schedule is used to determine the portion of tuition which will be refunded depending upon the date of formally withdrawing from a course or from the University. *See notes below.

Prior to the start of the class	100%
Before the start of the second week of classes	100%
Before the start of the third week of classes	50%
Before the start of the fourth week of classes	25%
After the start of the fourth week of classes	0%

**For courses with six or fewer class meetings (Intensive and Weekend Intensives), there is a 100% refund prior to the start of classes. Once the class has begun, there is no refund.*

**Actual percentage will depend on the official date of formal withdrawal.*

**Course fee(s) and/or registration fee(s) will not be refunded*

**Residence hall residents who withdraw will receive a pro-rated refund on the portion of the board that is not used.*

**Students who receive financial aid and who withdraw or reduce credit load during the refund period, will have an adjustment/reduction in their aid award.*

MISCELLANEOUS FEES

Please refer to our website, www.lesley.edu/studentaccounts, for further information on fees and policies.

SPONSOR/THIRD PARTY BILLING

If an outside agency or employer, which requires direct billing has agreed to pay all or part of a student's tuition and/or fees, billing authorization from the third party must be submitted to the Student Account's Office prior to the payment deadline. The Student Account's Office will then bill the agency for the amount they have agreed to pay. Any remaining balance will be billed to the student and is due *prior to* the payment deadline.

ADDRESS CHANGES

It is the student's responsibility to ensure the Student Accounts Office has the correct billing address. Students may update their billing address at studentaccounts@lesley.edu or 800-999-1959 extension 8760.

BILLING RIGHTS SUMMARY

All inquiries about the charges and payments on your student account should be directed to the Student Accounts Office at 800-999-1959 extension 8760 or studentaccounts@mail.lesley.edu.

Lesley University
Student Accounts Office
29 Everett Street
Cambridge MA 02138-2790
www.lesley.edu/studentaccounts