



Application to Readmit

Return this form, \$25 Readmit Fee, and Tuition and Fee Agreement to the appropriate Admissions Office. Additional documents and/or interview may be required. The catalog current at the time of readmission will govern program requirements, policies, and procedures. Students on academic suspension or academic disqualification must submit a written appeal to Steve Neilsen, Director of Student Retention, at sneilsen@calbaptist.edu.

Undergraduate Students: admissions@calbaptist.edu Fax: 951-343-4525
Graduate Students: graduateadmissions@calbaptist.edu Fax: 951-552-8700

Readmitting to: UNDERGRADUATE PROGRAM GRADUATE PROGRAM

CBU ID#: _____ SSN: _____ Date of Birth: _____

Semester Last Attended: _____ Readmit Semester: _____

Name _____

Address _____

E-mail: _____ Phone: () _____

College(s) attended since you last attended California Baptist University:

College: _____ Semester Attended: _____

College: _____ Semester Attended: _____

Send official transcripts to: CBU 8432 Magnolia Ave Riverside, CA 92504 Attn: Admissions Office OR Graduate Admissions

Undergraduate Student Major: _____ Concentration: _____

Graduate Student Previous Program:

Do you have any undisclosed arrests or convictions for a crime other than a minor traffic violation? Yes [] No []
If yes, please attach details stating the charge, date of conviction and disposition of the case.

I certify that the information provided above is true and complete to the best of my knowledge.

Student Signature _____ Date _____

For Internal Use Only

\$25 Paid [] Receipt # _____ CBU Staff _____

Readmitting to: Major _____ Specialization _____ Credential _____

Department Clearances:	
Student Services: _____	Date: _____
Student Accounts: _____	Date: _____
Tuition & Fee Agreement: _____	Date: _____
Registrar's Office: _____	Date: _____
Program Director/Dean: _____	Date: _____
Graduate Admissions: _____	Date: _____

Office of University Registrar:
Catalog Year _____
Classification _____
Academic Status _____
Approved _____
Students readmitted to CBU after officially or unofficially withdrawing are placed under the catalog current at time of Re-Admission.

Tuition and Fee Agreement



Office Use Only: TRAD MMAN DMAN BOPS MOPS DOPS INTL Sem_____

Student Information

Student Name: _____ CBU ID#: _____ *SSN: _____

*SSN is required for 1098-T tax reporting purposes.

Permanent Address (Street-City-State-Zip): _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Non-CBU Email Address: _____

Nearest Reference Contact (Friend/Relative): _____ Reference Contact Phone: _____

Reference Contact Address (Street-City-State-Zip): _____

Student Financial Agreement and Acknowledgement

Financial Obligation:

I understand tuition and fee charges are due and payable by the Payment Due Date each semester and I am solely liable for payment of all student account charges, regardless of financial aid, company reimbursement, or other aid to which I may be entitled. If I change my educational plans, I will take the appropriate steps to adjust my schedule or withdraw from the University. I further understand that in the event I withdraw from a course after the refund period my financial aid award may be reduced or reversed based on federal regulations. I also understand non-attendance in a class will NOT relieve my financial responsibility.

University Regulations:

I understand official communication from the University is transmitted via LancerMail, and I am charged with knowledge of the information transmitted by the University to my LancerMail. I agree to regularly logon to InsideCBU to review my LancerMail account and my Student Account information. I further acknowledge it is my responsibility to be aware of and comply with University policies and procedures including the Policy for Student Accounts, and the Policy for Refund of Tuition, Fees, Room, and Board charges.

Payment Due Date:

I understand I am obligated to complete payment through an approved payment option to cover all tuition and fee charges each semester by the Payment Due Date as published on InsideCBU. Failure to make payment by the Payment Due Date will result in a fee assessment and possible enrollment cancellation. I further understand that failure to make payments on any indebtedness to the University when due is considered sufficient cause, until the debt is settled with verified funds, to: 1) prevent enrollment, and 2) withhold diploma, grade reports and transcript of records.

Delinquent Accounts:

I understand that if I fail to pay my tuition and fee balance through an approved payment option, and the balance is not paid in full by the end of each semester, my account will be considered delinquent. Delinquent accounts may be charged interest at a rate of .03% computed daily or 10% per year. I also understand that if my account remains delinquent, my account is subject to, at the university's discretion, placement with a third party collection agency. I further understand that if my account is placed with a third party agency, interest will be added to the account as well as negative marks on my credit report. In the event my account is placed with a third party collection agency, I hereby waive my right to notice of such default, presentment and dishonor, as well as any right to any statute of limitations.

I authorize California Baptist University and its agents, representatives, attorneys and contractors (including collection agencies) to contact me through my mobile phone, home phone and email, including by way of text and automated message calls. I agree and understand it is my responsibility to update my name, address, and phone number(s) within thirty days of a change. I further agree that in the event I do not update my address and phone number(s), I authorize California Baptist University to utilize third party agents, representatives, attorneys and contractors (including collection agencies) as necessary to update my records at the university.

Acknowledgement:

I have read and agree to the above information and to all University policies and procedures as outlined in the University Catalog and Student Handbook.

Student's Signature: _____ Date: _____

Guardian's Signature: _____ Date: _____

(Signature of legal guardian required for all students under age 18.)*

*If a guardian signature is required the student will be asked to sign a new agreement once age 18.

Tuition and Fee Agreement

Application of Financial Aid

Application of Financial Aid - Allowable Charges

Per Federal Regulations (34 CFR 668.164) California Baptist University may use Federal Grants, Stafford Loans and Parent Plus Loans to credit a student's account at the institution to satisfy current charges for Tuition, Fees, Room and Board.

Other Educationally Related Charges

Per Federal Regulations (34 CFR 668.165) other educationally related charges may not be covered without written authorization from the student and/or parent. Other charges include but are not limited to International Service Project charges, fine charges, damage charges, family insurance charges, or Love Fund Loan repayment charges.

Prior Award Year Charges

Per Federal Regulations (34 CFR 668.165) California Baptist University may not use current award year financial aid to cover a prior year balance up to \$200 without written authorization from the student and/or parent. Prior year balances over \$200 may not be covered with current award year aid even with written authorization from the student and/or parent.

Balances Not Covered by Financial Aid

Balances not covered by Financial Aid must be covered from personal funds. A hold, preventing release of transcripts and future registration, will be placed on accounts with past due balances not covered by awarded financial aid.

Authorization to Cover Educationally Related Charges and Prior Award Year Charges

Please check and sign for only one of the below options:

- Yes**, I authorize California Baptist University to use my awarded financial aid to cover all educationally related charges and prior award year charges posted to my account.

Student Signature _____ Date _____

Printed Student Name _____ CBU ID# _____

Parent Plus Loan Signature _____ Date _____

- No**, I do not authorize California Baptist University to use my awarded financial aid to cover all educationally related charges posted to my account. I will pay other educationally related charges from personal funds.

Student Signature _____ Date _____

Printed Student Name _____ CBU ID# _____

Right to Cancel Authorization

Students and parents have the right to cancel their authorization to cover all educationally related charges and prior award year charges with financial aid at any time. To cancel the authorization, a student must complete a new Tuition and Fee Agreement, sign the "No, I do not authorize" option and submit the agreement to the Student Accounts Office. The cancellation will be effective the date the cancellation is received in the Student Accounts Office. Confirmation of cancellation will be sent to the student's LancerMail account. If the student has a past due balance at the time the cancellation is received a hold will be placed on the account until the account is paid in full with verified funds.

Submit Completed Form to Student Accounts

1. Scan and email: StudentAccounts@calbaptist.edu
2. Fax to: 951-343-4515
3. Mail to: CBU Student Accounts, 8432 Magnolia Ave, Riverside, CA, 92504