Student logs in and is immediately presented with the FRA.

Acknowledgement of Financial Responsibility

UMass Lowell Student Financial Responsibility Agreement

All Students who wish to register for a class are required to accept the student Financial Responsibility Agreement prior to registration. Students will be required to accept this agreement once each academic year. Please read this carefully and click "I Accept" at the bottom of the page. Students who do not accept this agreement will be unable to register for classes.

Agreement

University of Massachusetts Lowell Student Financial Agreement

I fully understand and agree that my authorization to enroll and continue to register for courses at the University of Massachusetts Lowell is expressly conditioned on my acceptance of the terms and conditions of this agreement ("Agreement") set forth below. In exchange for the opportunity to enroll at the University of Massachusetts Lowell, to receive educational services, and for other valuable consideration, I agree to the following terms and conditions.

PAYMENT OF FEES/PROMISE TO PAY

I understand and agree that when I register for any class or receive any service at the University of Massachusetts Lowell, I am agreeing to accept full responsibility to pay all tuition, fees and other associated costs assessed as a result of my registration and/or receipt of services. I further understand and agree that my registration and acceptance of these terms constitutes a promissory note agreement (i.e., a financial obligation in the form of an educational loan as defined by the U.S. Bankruptcy Code at 11 U.S.C. §523(a)(8)) in which the University of Massachusetts Lowell is providing me educational services, deferring some or all of my payment obligation for those services, and I promise to pay for all assessed tuition, fees and other associated costs by the published or assigned due date.

FINANCIAL AID

I understand that aid described as ‘estimated’ on my Financial Aid Award does not represent actual or guaranteed payment but is an estimate of the aid I may receive if I meet all requirements stipulated by that aid program.

I understand that my Financial Aid Award is contingent upon my continued enrollment and attendance in each class upon which my financial aid eligibility was calculated. If I drop any class before completion, I understand and agree that my financial aid eligibility may decrease and some or all of the financial aid awarded to me may be revoked. If some or all of my financial aid is revoked because I dropped or failed to attend class, I agree to repay all revoked aid that was disbursed to my account and resulted in a credit balance that was refunded to me.

I agree to allow financial aid I receive to pay any and all charges assessed to my account at the University of Massachusetts Lowell such as tuition, fees, campus housing and meal plans, student health insurance, service fees, fines, bookstore charges, or any other amount, in accordance with the terms of the aid.
WITHDRAWAL/FAILURE TO WITHDRAW

I understand and agree that if I drop or withdraw from some or all of the classes for which I register, I will be responsible for paying all or a portion of tuition and fees in accordance with the published tuition refund schedule available at Refund Withdrawal Policy.

I have read the terms and conditions of the published tuition refund schedule and understand those terms are incorporated herein by reference. I further understand that my failure to attend class or receive a bill does not absolve me of my financial responsibility as described above.

DELINQUENT ACCOUNT/COLLECTION

Financial Hold: I understand and agree that if I fail to pay my student account bill or any monies due and owing the University of Massachusetts Lowell by the scheduled due date, the University of Massachusetts Lowell will place a financial hold on my student account, preventing me from registering for future classes, obtaining official transcripts, or receiving my diploma.

Late Payment Charge: I understand and agree that if I fail to pay my student account bill or any monies due and owing the University of Massachusetts Lowell by the scheduled due date, the University of Massachusetts Lowell may assess late payment charge as noted under the Fee Descriptions website, on the past due portion of my student account until my past due account is paid in full.

Collection Agency Fees: I understand and agree that if I fail to pay my student account bill or any monies due and owing the University of Massachusetts Lowell by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, the University of Massachusetts Lowell may refer my delinquent account to a collection agency. I further understand that if the University of Massachusetts Lowell refers my delinquent account to a third party for collections, a collection fee will be assessed and will be due in full at the time of the referral to the third party. The collection fee will be calculated at the maximum amount permitted by applicable law but not to exceed 33% of the amount outstanding. For purposes of this provision, the third party may be a debt collection company or an attorney. If a lawsuit is filed to recover an outstanding balance, I shall be responsible for any costs associated with the lawsuit such as court costs or other applicable costs. Finally, I understand that my delinquent account may be reported to one or more of the national credit bureaus, i.e. Equifax, Experian, or TransUnion.

COMMUNICATION

Method of Communication: I understand and agree that the University of Massachusetts Lowell uses e-mail as an official method of communication with me, and that therefore I am responsible for reading the e-mails I receive from the University of Massachusetts Lowell to any email address I have on file, including my University of Massachusetts Lowell student email, on a timely basis.

Contact: I authorize the University of Massachusetts Lowell and its agents and contractors to contact me at my current and any future cellular phone number(s), email address(es) or wireless device(s) regarding my delinquent student account(s)/loan(s), any other debt I owe to the University of Massachusetts Lowell, or to receive general information from the University of Massachusetts Lowell. I authorize the University of Massachusetts Lowell and its agents and contractors to use automated telephone dialing equipment, artificial or pre-recorded voice or text messages, and personal calls and emails, in their efforts to contact me. Furthermore, I understand that I may withdraw my consent to call my cellular phone using automated telephone dialing equipment by submitting my request in writing to the Collections Manager at the University of Massachusetts Lowell or in writing to the applicable contractor or agent contacting me on behalf of the University of Massachusetts Lowell.
Updating Contact Information: I understand and agree that I am responsible for keeping the University of Massachusetts Lowell records up to date with my current physical addresses, email addresses, and phone numbers by following the procedure at Update My Information. Upon leaving the University of Massachusetts Lowell for any reason, it is my responsibility to provide the University of Massachusetts Lowell with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to the University of Massachusetts Lowell.

METHOD OF BILLING

I understand that the University of Massachusetts Lowell conducts business electronically. This includes but is not limited to receiving billing information through my online student account at View My Sis Account. I understand and agree that I am responsible for viewing and paying my student account by the scheduled due dates. My failure to view my online student account does not absolve me of any financial obligations owed under this Agreement.

BILLING ERRORS

I understand that administrative, clerical, or technical billing errors do not absolve me of my financial responsibility to pay the correct amount of tuition, fees and other associated financial obligations assessed as a result of my registration at the University of Massachusetts Lowell. Should I believe my account to have any billing errors, I agree to contact the University of Massachusetts Lowell in writing within sixty (60) days after noting the error.

RETURNED PAYMENTS/FAILED PAYMENT AGREEMENTS

If a payment made to my student account is returned by the bank for any reason, I agree to repay the original amount of the payment plus a returned payment fee as noted under the Returned Check Fee. I understand that multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I sign with the University of Massachusetts Lowell may result in cancellation of my classes and/or suspension of my eligibility to register for future classes at the University of Massachusetts Lowell.

STUDENT AGE

I understand and agree that if I am younger than the applicable age of majority when I execute this agreement that the educational services provided by the University of Massachusetts Lowell are a necessity or essential service, and I am contractually obligated under this Agreement pursuant to the “doctrine of necessaries.”

IRS FORM 1098-T

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to the University of Massachusetts Lowell upon request as required by Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to provide my SSN or TIN to the University of Massachusetts Lowell, I agree to pay any and all IRS fines assessed as a result of my missing SSN/TIN. Additionally, I consent to receive my annual IRS Form 1098-T, Tuition Statement, electronically from the University of Massachusetts Lowell. I understand that I can withdraw this consent or request a paper copy by following the instructions on the Tax Information page.
GOVERNING LAW/FORUM

I understand and agree that this Agreement is entered into in the Commonwealth of Massachusetts, and the laws of the Commonwealth, without giving effect to its conflicts of law principles, govern all matters arising out of or relating to this Agreement and all of the transactions it contemplates, including, without limitation, its validity, interpretation, construction, performance and enforcement.

I agree that any action arising out of or relating to this Agreement or the relationship between the myself and the University of Massachusetts Lowell shall be brought in the state courts of the Commonwealth of Massachusetts, which shall have exclusive jurisdiction thereof. I expressly consent to the jurisdiction of Suffolk County state courts of the Commonwealth of Massachusetts and waive any claim or defense that such forum is not convenient or proper. This paragraph shall not be construed to limit any other legal rights of myself or the University of Massachusetts Lowell.

SEVERABILITY

If any provision, term, or clause of this Agreement is declared illegal, unenforceable, or ineffective in a legal forum with competent jurisdiction to do so, this Agreement shall be deemed severable, and all other provisions, terms and clauses of the Agreement will remain valid and binding on the Parties.

ENTIRE AGREEMENT

This Agreement supersedes all prior understandings, representations, negotiations and correspondence between the student and the University of Massachusetts Lowell, constitutes the entire agreement between the parties with respect to the matters described, and shall not be modified or affected by any course or dealing or course of performance. The University of Massachusetts Lowell may amend this Agreement only in writing and with my signature. Any amendment is specifically limited to those policies and/or terms addressed in the amendment.

By selecting the "I Accept" button, I understand and agree that I am signing this Agreement electronically and electronic signature is the legal equivalent of my manual signature on this Agreement under Massachusetts state law. I understand and agree that the electronic signature appearing on this Agreement is the same as my handwritten signature for purposes of validity, enforceability and admissibility.

Acknowledgement

I understand and agree that I am signing this agreement electronically and the electronic signature is the legal equivalent of my manual signature on this agreement under Massachusetts state law. I understand and agree that the electronic signature appearing on this agreement is the same as my handwritten signature for purposes of validity, enforceability and admissibility.

I Accept

Not Now
Student can collapse the “Agreement” if they choose to.

If the student chooses the “Not Now” button

- Student can click “Return to Agreement”- which will return them to the full agreement above
- Student can click “OK, I’ll be back later” – will send them to the Student Center
If the student decides to complete the agreement after navigating back to the Student Center:

1. Student can re-login and it will present them with the FRA Agreement page again
2. Student can navigate to the Student Financial Center and click “Complete My Financial Responsibility Agreement”
If the student chooses the “I Accept” button

- If they did not click the “Select” they will be prompted with the message to check the box.

- Upon clicking the “I Accept” button, they will be prompted with a message notifying they have accepted the FRA.

You have accepted the student Financial Responsibility Agreement which is effective for this academic year. To view and/or print the agreement which now includes your electronic signature and acceptance date, please navigate to the Main Menu click on Finances, Student Financial Center, and then View My Financial Agreement.
Student can navigate to the Student Financial Center and click “View My Financial Responsibility Agreement”
They will be prompted with a message and should click “View Agreement(pdf)”

The PDF opens in a new browser window and provide at the end of the PDF:
- Student Name
- Student signed date
- Student ID
- Year they are signing for

ENTIRE AGREEMENT

This Agreement supersedes all prior understandings, representations, negotiations and correspondence between the student and the University of Massachusetts Lowell, constitutes the entire agreement between the parties with respect to the matters described, and shall not be modified or affected by any course or dealing or course of performance. The University of Massachusetts Lowell may amend this Agreement only in writing and with my signature. Any amendment is specifically limited to those policies and/or terms addressed in the amendment.

By selecting the "I Accept" button, I understand and agree that I am signing this Agreement electronically and electronic signature is the legal equivalent of my manual signature on this Agreement under Massachusetts state law. I understand and agree that the electronic signature appearing on this Agreement is the same as my handwritten signature for purposes of validity, enforceability and admissibility.

Acknowledged by:

Rowdy Riverhawk on 2/20/2023 Student ID: 00000000 Year: 2022