

### Third Party Billing Agreement

I have presented authorization to the Bursar's Office from my third party sponsor to bill for the tuition and fees that I've listed below. I understand and agree to the following terms and conditions:

1. I am responsible for making payment at the time of registration for charges that are not authorized by my third party sponsor.
2. I will be responsible for providing timely information as requested by either the Bursar's Office or my third party sponsor regarding this agreement.
3. If the Bursar's Office does not receive payment from my third party sponsor by the end of the subsequent term to which this agreement applies, I will be responsible for the balance not paid and my account will be placed on hold and I will not be permitted to register or receive a diploma or transcript.
4. I understand the Bursar's Office reserves the right to refuse to bill my third party sponsor if there is a pattern of non-payment from my third party sponsor in past terms.
5. **I understand that this agreement does not relieve me from any financial responsibilities to The University of Tennessee since I am ultimately responsible for my entire student account balance.** I understand if I have an unpaid balance to the University and do not make satisfactory payment arrangements, my account may be placed with an external collection agency. I will be responsible for reimbursement of any fees from a collection agency, which may be based on a percentage at a maximum of 33% of the debt, and all costs and expenses, including reasonable attorney's fees incurred in collection efforts.
6. I understand that I must file an agreement with the Bursar's Office at the time of registration for **each** term.
7. I authorize The University of Tennessee to provide my third party sponsor course and financial information pertaining to my enrollment under this agreement.
8. I understand a \$30 third party billing fee (if applicable) will be added to my student account and will be my responsibility if my third party sponsor will not pay this fee.
9. In order for the Bursar's Office to bill my third party sponsor, **I must attach a copy of my sponsorship/award letter to this agreement.**
10. I consent to being contacted on all phone numbers, including cell phones, provided to the University as a source of contact. This includes contact from its agents, representatives, and attorneys (including collection agencies) for purposes of collecting any portion of my financial obligation which is past due.

Student Name: \_\_\_\_\_ (print)

UT Student ID#: \_\_\_\_\_

Term of Enrollment: \_\_\_\_\_

Name of Third Party Sponsor: \_\_\_\_\_ (print)

My Third Party Sponsor will pay the following:

Tuition: \$ \_\_\_\_\_ Fees: \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_ (please specify): \_\_\_\_\_

*I have carefully and completely read this agreement and fully understand the purpose, intent, and effect of this agreement.*

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please return this signed agreement and sponsorship/award letter to:**

Bursar's Office

211 Student Services Building Knoxville, TN 37996

[thirdparty@utk.edu](mailto:thirdparty@utk.edu) Fax: 865-974-1945