



Tuition Payment Plan Agreement

Student(s) Name: _____ Program of Study in CPS: _____

Name of the person requesting the payment plan: _____

Telephone number: _____ Email: _____

Home Address: _____

Total Tuition due: _____ Current Academic Year: _____

Number of Instalments: _____ Date of Initial Payment: _____

Payment amounts for each remaining instalment: _____

Form of payment: cash check PayPal Bank account online money transfer

Please read and initial the following:

- I agree to pay the stated amount of tuition to the Chicago Persian School, under the terms of this instalment plan. initials_____
- If a check is returned due to insufficient fund, I will pay the associated penalty fees. initials_____
- I may request a one-week extension for a payment instalment date by writing to the school administrators at least one week in advance. initials_____
- Failure to fulfill my obligations will result in the termination of my registration. initials_____

 Signature

 Relationship to the student

 Chicago Persian School Board of Directors, Member

 Date