



3201 Eaton Road • Green Bay, WI 54311 • 1-920-433-6640

**Application for DPT Summer Semester Payment Plan**

Student Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Program of Study: \_\_\_\_\_

I hereby apply to participate in the Bellin College Semester Payment Plan for payment of tuition and fees resulting in my enrollment for the **Summer 2026 semester**.

With this requested enrollment for the **Summer 2026** semester I agree to remit the balance in three equal installments on: **May 8, June 8, and concluding on July 8, 2026**.

I authorize Bellin College to charge my tuition account for the **nonrefundable enrollment fee of \$15.00 for the summer semester**.

It is understood that failure to comply with this payment plan will result in cancellation of the plan and the full balance of tuition and fees due. I also understand that failure to submit my monthly payment by the due date may result in a \$25 late payment fee and loss of Canvas access.

This document must be returned to the Bursar no later than **May 4, 2026** to be enrolled in the payment plan.

**By signing this document, I agree to all the above terms.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

For Office Use Only:

Date Received \_\_\_\_\_ Initial \_\_\_\_\_