You Must Include:
- ☐ Total Activation Payment
- ☐ This Document Completed
- ☐ E-Check Receipt

(If payment made w/ E-Check)
Email barc.info@bfs.ucsb.edu
Mail To / Overnight To:
UCSB BARC Office
1212 SAASB, Santa Barbara
Ca. 93106-2003
FAX (805) 893-8063

UCSB BILLING OFFICE
GENERAL PAYMENT AGREEMENT FORM

For use by students without Fin Aid or TA/RA contract this quarter

FALL 2018	☐	☐	SPRING 2019
WINTER 2019	✔	☐	SUMMER 2019

**Red = Required field*
Type name and then tab to fields and enter data

***LAST, FIRST NAME**

***STUDENT PERM #**

***EMAIL** ***PHONE #**

***ACCOUNT BALANCE**

CLICK STAR for BARC Bal & Billing Acct # ★

***ENTER QUARTERLY HOUSING PORTION OF BALANCE**
(MONTHLY Housing charges NOT eligible for Payment Plan)

2/3 REGISTRATION & HOUSING FEES $3,944.60
(Based on Registration Status selected above)

AMOUNT DEFERRED $0.00
(Maximum = lesser of 2/3 Registration & Housing Fees or 2/3 of Account Balance)

DOWN PAYMENT $0.00
(Account Balance less Amount Deferred)

Enrollment Fee (NON REFUNDABLE) $25.00

TOTAL DUE TO ACTIVATE PLAN $25.00
(Full payment due with form to activate plan)

***Indicate your Registration Status:**

UNDERGRADUATE	
CA RES	NON-RES
●	○

GRAD - **NOT A TA/RA**	
CA RES	NON-RES
○	○

PAYMENT SCHEDULE

JAN 15th 2019	$0.00
FEB 15th 2019	$0.00

MAKE CHECKS PAYABLE TO: UC REGENTS

Undergrad: Due Dec 17th, 4pm Grad: Due Jan 07th, 4pm

By signing below, I agree to timely pay the installment(s) billed to my monthly statement(s). I understand a late fee will be assessed for any payment not received by its installment due date. Failure to make a payment may result in lapse of registered status and future registration may be blocked. I also understand that if I neither correctly prepare this form, nor fully pay the "Total Due to Activate Plan" when I submit this form, my registration may be delayed and a $50 late fee (subject to change) and/or blocks may be placed on my BARC account. I have read and understand the conditions, and agree to honor this agreement.

***STUDENT SIGNATURE** ***DATE**

FOR BARC USE ONLY

PLAN ENROLLED *ENROLLED BY* **DATE*

PAYMENT PLAN FEE: *FIN AID* *BARC'D* *AUTHORIZED*