

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 2019 ☒ SPRING 2020
WINTER 2020 ☐ SUMMER 2020

**Red = Required field*

Type name and then tab to fields and enter data

*LAST, FIRST NAME

Sipin, Terrell

*STUDENT PERM #

3430501

*EMAIL

tjsipin@ucsb.edu

*PHONE #

(925) 577-9685

*ACCOUNT BALANCE

CLICK STAR for BARC
Bal & Billing Acct #



\$7,894.99

*ENTER QUARTERLY HOUSING
PORTION OF BALANCE

\$5,030.00

(MONTHLY Housing charges NOT eligible for Payment Plan)

2/3 REGISTRATION & HOUSING FEES

(Based on Registration Status selected above)

\$7,337.26

AMOUNT DEFERRED

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

\$5,263.33

DOWN PAYMENT

(Account Balance less Amount Deferred)

\$2,631.66

Enrollment Fee (NON REFUNDABLE)

\$25.00

TOTAL DUE TO ACTIVATE PLAN

(Full payment due with form to activate plan)

\$2,656.66

*Indicate your Registration Status:

UNDERGRADUATE

CA RES

NON-RES



GRAD - **NOT A TA/RA**

CA RES

NON-RES



PAYMENT SCHEDULE

OCT 15th 2019 \$2,631.66

NOV 15th 2019 \$2,631.66

MAKE CHECKS PAYABLE TO: UC REGENTS

Undergrad: Due Sept 16th, 4pm

Grad: Due Sept 26th, 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

☐