

Graduate Student Tuition Income Offset Plan Form Pre-authorized Debit (PAD) Agreement

Form submission deadlines

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| September – August due September 15 | January - August due January 15 | May – August due May 15 |
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Submit a \$25.00 fee with this form. The fee is applicable with each PAD renewal.

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|---|-----------|---|----------------|
| 1. Student Information: (please print clearly) | | | |
| Name: | | UVic ID: V | |
| Mailing Address: | | | |
| City: | Province: | Postal Code: | |
| Phone Number: | | E-mail: | |
| 2. A void cheque or letter from your financial institution <u>MUST BE ATTACHED</u> | | | Initial |
| 3. Pre-Authorized Debit (PAD) Details | | | |
| I/We, the Payor, authorize the University of Victoria to debit the bank account identified above for Tuition Payments per the terms outlined below and pursuant to the tuition account information. This agreement is in effect until the expiry date of Aug 31 st each year unless a payment is not honoured by the bank or is cancelled by the Payor. | | | |
| To cancel this PAD you must provide 10 days advance written notice to Tuition Fees by completing a PAD debit cancellation notice . For more information contact your financial institution or visit www.cdnpay.ca . | | | |
| <ul style="list-style-type: none"> • These services are for (check one) Personal Business • I/We hereby acknowledge that the PAD Agreement expires August 31st of each year and a new agreement will be required to participate further in the Plan. Initial • I acknowledge that any registration changes/opt outs occurring after the submission deadlines may not be included in the calculated amounts for the Plan. Initial • I acknowledge that any payment that is declined by the bank will result in an automatic cancellation of of the plan and all amounts owing on the student account will be the students responsibility, subject to all service charges and holds. Initial | | | |
| _____ Signature | | _____ Signature of Joint Account Holder (if applicable) | |
| Date: | | | |

| Office Use Only | | | |
|-----------------------|------|--------|--------|
| | FALL | SPRING | SUMMER |
| Total Fees | | | |
| Monthly Amount | | | |

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on your rights, contact your financial institution or visit www.cdnpay.ca.

Return completed form:

In person to: UVic-Tuition Fees
University Centre
1st Floor, Room A115

By Mail: Tuition Fees
University of Victoria
PO Box 1700 Victoria,
BC V8W 2Y2

By Email: tuition@uvic.ca
By Fax: 250-721-6221