

Student Business Services

Main Campus, Sen. Frank L. Madla Building One University Way, San Antonio, Texas 78224

Phone: (210) 784-2035 • Fax: (210) 784-2029

Temporary Repayment Agreement

Borrower Information						
Name:				Student SS#:		
Address:				Cell Phone #:		
City, State, Zip:	H		Home Phone #:			
				Banner#		
Statement of Account Informatio	<u>n</u>			1		ı
Term of Debt:		Original Due Date of Term:		Current Balance Prior to Initial Payment:		
Schedule of Payments for TRA						
First Initial Payment Amount:						
First Initial Payment Due Date:						
Monthly Amount Agreed to Pay:						
* Understand and agree to the above Schedul *I have been advised and fully understand th * Understand that if a payment is not made in * Understand that I will remain blocked from * Understand that accounts are reported to a collection agency, which will increase the deb * Understand that to insure that I receive a m Furthermore, I understand that it is my respon * Understand that this Temporary Repayment plan offer due to the fact that I did not honor *I understand that I may only renegotiate the *I understand and agree to the terms of this T	e of Payments. at as required I a timely manner receiving transor national credit I t in an amount conthly billing sta asibility to make Agreement do the terms of the	by the laws of the amount of the amount of the exceed at the amount of t	of the State of Texa to I owe will become other University S a monthly basis be d 30% for the first a st notify the Busin yments whether on the terms of the parts of the parts.	as and University Regulations, I in the due in full immediately. ervices until this loan is paid in further ased on the payment status and polacements and 30% for second press Office (at the address or phore not I receive a billing statement. promissory note (if debt is arising	must adhere to ill. delinquent accololacements. ne number listed . g from a loan) I h	unts may be placed with an external d below) of any address changes .
State law requires that you be informed of the follows (2) You are entitled to receive and review the informa			-		cted by use of this f	form (with a few exceptions as provided by the law);
Signature:				Date:		
Approved by:				Date:		

Business Office Texas A&M University-San Antonio One University Way San Antonio, TX 78224 Phone: 210.784.2035