



2026 – 2027 Payment Plan Agreement

Business Office
4000 Whiting Drive
Midland, MI 48640
www.northwood.edu
Phone: 989.837.4207
Fax: 989.837.4104
mibusoff@northwood.edu

Date: _____ Student ID#: _____

Student Name: _____

\$40 Payment Plan registration fee per semester. This form is for Spring semester 2027 only. The deadline to return this form is Thursday December 11. The payment is due no later than 12 noon (EST) on Monday, December 14, 2026.

The number of monthly payments will be determined based on the enrollment date of the payment plan. Northwood University has the right to adjust the payment plan should there be changes to your student account due to changes in your registration and/or financial aid.

Payments can be made online through Self-Service by logging into my.northwood.edu. Accepted methods of payments: Visa, MasterCard, American Express, Discover (Debit/Credit Card payments will be assessed a 2.75% service fee) and E-check (\$35 NSF for any returned checks).

Only US citizens may apply

I agree to the following terms and conditions:

- Payments are due on the 15th of the month.
 - There is no penalty for prepayment of the plan and the plan balance may be paid off at any time during the semester.
 - The balance of the current semester plan must be paid in full prior to the end of each semester.
 - An additional fee of \$20 and a registration hold will be assessed on payments not made according to the agreement, such as late payments, underpayments, etc.
 - The payment plan will be in default and cancelled if two consecutive payments are not made and account balance will become due in full.
 - Payment plans are for current semester charges and will not include previous semester balances.
 - Northwood University has the right to adjust my payment plan should there be changes to my account due to changes with registration, financial aid eligibility, etc. The University will regularly review my account to ensure the accuracy of my payment plan.
 - Northwood University shall have the right to withhold academic records, certifications and diplomas, and may refuse to accept registration for future semesters until this account is paid in full.
 - I understand that if I fail to make timely payment and my failure to pay continues after being notified that my account is in default, Northwood University will have the right to use a collection agency and/or any other legal means to collect the amounts I owe to the University. I acknowledge that I will be responsible for any collection fees, including court costs, incurred by the University in its collections of amounts owed under my account.
 - If there are any circumstances that may prevent me from complying with this agreement, I will promptly inform Northwood University's Finance and Accounting Services office by calling 989.837.4207.
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To be completed by the student:

Name: _____ Student Phone Number: _____

****Be advised correspondence regarding this payment plan will be sent electronically to your Northwood email address.**

I certify that I have read, fully understand and agree with the contents of this agreement, and do hereby affix my signature attesting to this fact.

Signature: _____ Date: _____

**Please return payment plan agreements to:
Northwood University Business Office
Fax: 989.837.4104 or Email: mibusoff@northwood.edu**

For Office Use Only:

Business Office Signature/Date: _____ Term: _____