ATLANTIC CAPE COMMUNITY COLLEGE

FINANCIAL DISCLOSURE STATEMENT

Effective Date: November 4, 2026

By checking the acknowledgment box, I certify that I have read, understand, and agree to the terms and conditions of this Financial Disclosure Statement. By electronically accepting this Agreement, I acknowledge that my electronic signature has the same legal effect as a handwritten signature and that I am legally bound by the terms and conditions contained herein.

1. Payment of Fees/Promise to Pay:

By accepting the terms and conditions of the Financial Disclosure Statement, I understand when I register for any class at Atlantic Cape Community College (hereinafter referred to as 'the Institution') or receive any service from the Institution I accept full responsibility to pay all tuition, fees, and other associated costs assessed as a result of my registration and/or receipt of services. I further understand and agree that my registration and acceptance of the terms and conditions constitutes a financial obligation arising from the receipt of educational services and may be subject to applicable provisions of federal bankruptcy law, including 11 U.S.C. §523(a)(8), where applicable.

I agree to pay all assessed tuition, fees, and other associated costs by the published or assigned due date.

I understand and agree that if I drop or withdraw from some or all of the classes for which I register, I will be responsible for paying all or a portion of tuition and fees in accordance with the published tuition refund schedule at atlanticcape.edu/academics/calendar.php I have read the terms and conditions of the published tuition refund schedule and understand those terms are incorporated herein by reference. I further understand my failure to attend class, review my student account, or receive an electronic or hard-copy billing notification does not absolve me of my financial responsibility as described above and I acknowledge that making changes to my courses or withdrawing from my course(s) may result in a balance due on my account and may affect my financial aid awards and eligibility.

2. Delinquent Account/Collections/SOIL Program:

Financial Hold: I understand and agree that if I fail to pay my student account bill or any monies due and owing to the Institution by the published or assigned due date, the Institution may place a financial hold on my student account, preventing me from

registering for future classes, obtaining my diploma, or accessing other services permitted by law until the outstanding balance is satisfied.

The Institution may undertake internal collection efforts prior to referring an account to an external collection agency.

Registration cancellation of classes: The Institution reserves the right to cancel registration, remove students from classes, or otherwise modify enrollment status for nonpayment or failure to satisfy payment arrangements by established deadlines.

Payment Plan Late Fee: I understand and agree that if I fail to pay my scheduled payment plan installment or any monies due and owing to the Institution by the scheduled due date, the Institution will assess a late payment fee at the rate of $35.00 per missed installment.

Collection Agency Fees: I understand and accept that if I fail to pay my student account bill or any monies due and owing to the Institution by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, the Institution may refer my account to a collection agency. If the Institution refers my account balance to a third party for collection, whether an attorney or collection agency, I will be responsible for any and all costs (including, but not limited to collection fees) associated with attempting to collect the monies due and owing. I understand the collection fee will be assessed to my account and will be due and owing in full at the time of referral to the third party. The collection fee will be calculated at the maximum amount permitted by applicable law.

For purposes of this provision, the third party may be a debt collection agency company or an attorney. If a lawsuit is filed to recover an outstanding balance, I will also be responsible for any costs associated with the lawsuit such as court costs, attorney fees, or other applicable costs.

Finally, I understand my delinquent account may be furnished to one or more of the national credit bureaus, using my Social Security Number to submit the debt.

Set Off Individual Liability (SOIL): I understand and accept that if I fail to pay my student account bill or any monies due and owing to the Institution by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, the Institution may refer my account to the State of New Jersey Set-Off Individual Liability (SOIL) program, using my Social Security Number.

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3. Method of Communication:

I understand and agree that the Institution uses the student Buccaneer Email as the official method of communication with me, and I am responsible for reading the e-mails I receive from the Institution on a timely basis. I consent to receive electronic communications related to my student account, financial obligations, financial aid, billing statements, payment reminders, and collection notices. Electronic delivery shall constitute official notification from the Institution.

I am responsible for regularly reviewing my student account through the Institution's student information system to monitor balances, payment deadlines, holds, and other account-related information.

Contact: I authorize the Institution and its agents to contact me at my current and future phone number(s) or email address regarding my delinquent student account(s)/loan(s), any other debt I owe the Institution, or to receive general information from the Institution.

Updating Contact Information: I understand and agree that I am responsible for keeping the Institutional records up to date with my current mailing addresses, e-mail addresses, and phone numbers by following the procedure at https://acccdtsfss22.atlantic.edu/Student/UserProfile

The linked procedure is incorporated herein by reference.

Upon leaving the Institution for any reason, it is my responsibility to provide the Institution with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to the Institution.

4. Financial Aid:

I understand financial aid listed as 'Estimated' or 'Anticipated' is not guaranteed and remains subject to verification of eligibility, enrollment status, academic progress, and program requirements. Such aid does not represent actual or guaranteed payment. I understand it is an estimate of the aid I may receive if I meet all requirements stipulated by that specific aid program. I understand my Financial Aid Award is contingent upon my continued enrollment and attendance in each class upon which my financial aid eligibility was calculated. If I drop any class before completion, I understand my financial aid eligibility may decrease and some or all of the financial aid awarded to me may be revoked.

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If some or all of my financial aid is revoked because I dropped or failed to attend a class, I agree to repay all revoked aid disbursed to my account and any credit balance refunded to me. I agree to allow financial aid received to pay any and all charges assessed to my account at the Institution such as tuition, fees, service fees, fines, bookstore charges, or any other amount, in accordance with the terms of the aid.

I understand that withdrawing from courses may require the Institution to perform a Return of Title IV Funds (R2T4) calculation in accordance with federal regulations. As a result, a portion of my federal financial aid may be returned to the U.S. Department of Education and I may become responsible for repaying balances owed to the Institution and/or federal aid programs. I understand continued eligibility for financial aid is subject to compliance with federal, state, institutional, and program-specific requirements, including Satisfactory Academic Progress (SAP) standards.

Federal Aid: I understand any federal Title IV financial aid I receive, except for Federal Work-Study wages, will first be applied to any outstanding balance on my account for tuition, fees, and other allowable institutional charges. Title IV financial aid includes aid from the Pell Grant, Supplemental Educational Opportunity Grant (SEOG), Direct Loan, PLUS Loan, and other grant programs. I authorize the Institution to apply my Title IV financial aid to other charges assessed to my student account such as bookstore charges, service fees and fines, and any other education related charges, and/or prior term balances, as allowable. I further understand this authorization will remain in effect until I rescind it in writing. I may withdraw it at any time by emailing bursar@atlanticcape.edu from my student Buccaneer Email.

Prizes, Awards, Scholarships/Grants: I understand all prizes, awards, scholarships, and grants awarded to me by the Institution will be credited to my student account and applied toward any outstanding balance. I further understand my receipt of a prize, award, scholarship, or grant is considered a financial resource according to federal Title IV financial aid regulations and may therefore reduce my eligibility for other federal and/or state financial aid (i.e., loans, grants, Federal Work-Study) which, if already disbursed to my student account, must be reversed and returned to the aid source.

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5. Billing:

Method of Billing: I understand the Institution sends all billing communications through the student Buccaneer Email account. I am responsible for viewing and paying my student account via self-service by the scheduled or posted due date. I further understand failure to review my self-service account does not constitute a valid reason for failing to pay my bill, or paying my bill late.

Billing/ Refund Errors: I understand administrative, clerical, and/or technical billing errors do not absolve me of my financial responsibility to pay the correct amount of tuition, fees, and other associated financial obligations assessed as a result of my registration at the Institution.

If I receive a refund, financial aid disbursement, or other payment to which I am not entitled as a result of administrative, clerical, technical, or processing error, I agree to return such funds to the Institution immediately upon notification.

Returned Payments/Failed Payment Agreements: If a payment made to my student account is returned by the bank for any reason, I agree to repay the original amount of the payment plus a returned check fee of $35.00. I understand multiple returned payments and/or failure to comply with the terms of any payment plan or agreement I sign with the Institution may result in the cancellation of my class and/or suspension of my eligibility to register for future classes at the Institution.

I also understand a late fee may be assessed if I do not fulfill the terms and conditions of my payment plan installment schedule.

6. Withdrawal:

If I decide to withdraw from all courses, I will follow the instructions at

https://catalog.atlantic.edu/student-handbook/withdraw-from-a-class-w-grade , which I understand and agree are incorporated herein by reference.

7. Privacy Rights & Responsibilities:

I understand the Institution is bound by the Family Educational Rights and Privacy Act (FERPA) which prohibits the Institution from releasing any information from my education record without my written permission. Therefore, I understand if I want the Institution to

share information from my education record with someone else, I must provide written permission by following the procedure outlined at atlanticcape.edu/about/compliance/ferpa.php. I further understand I may revoke my permission at any time as instructed in the same procedure.

8. IRS Form 1098-T:

I agree to provide my Social Security number (SSN) or taxpayer identification number (TIN) to the Institution upon request as required by the Internal Revenue Service (IRS) regulations for Form 1098-T reporting purposes. If I fail to provide my SSN or TIN to the Institution, I acknowledge that federal law may impose penalties for failure to provide a required taxpayer identification number.

I also consent to receive my annual IRS Form 1098-T, Tuition Statement, electronically from the Institution. I understand if I do not consent to receive my Form 1098-T electronically, a paper copy will be provided. I understand I can withdraw this consent or request a paper copy by following the instructions at atlanticcape.edu/admission/selfservice/faq.php

9. Entire Agreement:

This Agreement supersedes all prior understandings, representations, negotiations and correspondence between the student and the Institution, constitutes the entire Agreement between the parties with respect to the matters described, and shall not be modified or affected by any course of dealing or course of performance. The Institution reserves the right to modify this Agreement and related policies from time to time in accordance with applicable law. Such modifications shall be effective upon publication or other notice provided by the Institution.

Governing Law: This Agreement, and all claims arising out of or relating to this Agreement, shall be governed in accordance with the laws of the State of New Jersey, including, but not limited to, the New Jersey Contractual Liability Act, N.J.S.A. 59:13-1, et seq. and the New Jersey Tort Claims Act, N.J.S.A. 59:1-1, et seq.

Severability: If any provision of this Agreement is determined to be invalid or unenforceable under applicable law, the remaining provisions shall remain in full force and effect.