



Temporary Repayment Agreement

Borrower Information

Name:		UIN/SSN:	
Address:		Cell Phone #:	
City, State, Zip:		Phone #:	
Name of Employer:		Work Phone #:	
Sources to Pay:		E-mail:	

Statement of Account Information

Account Number:	Original Due Date:	Balance: (thru _____)

Schedule of Payments for TRA

First Payment Amount:	
First Payment Due Date:	
Monthly amount due on the 15 th of each month:	

Terms of the Temporary Repayment Agreement

This Repayment Agreement is a written agreement between the student and Texas A&M University in an attempt to collect this delinquent account in our office and prevent the student from paying collection costs. The account will be closely monitored for payments. If the monthly payment is not received in our office the account may be **placed with an external collection agency**, which will increase the debt by up to 33 1/3% for first placements and 66 2/3% for second placements. Accounts are **reported to a national credit bureau (s)** on a monthly basis **based on the original terms of the promissory note**.

*I understand and agree to the above Schedule of Payments.

***I have been advised and fully understand that, as required by the laws of the State of Texas and University Regulations, I must adhere to the above Schedule of Payments before I will be permitted to pre-register or register for any other semester or term. I also understand that I am subject to being academically withdrawn from the University for the semester in which I was allowed to register if I do not repay my balances as per my Schedule of Payments.**

*I understand that if a payment is not made in a timely manner, the amount I owe will become due in full immediately.

*I understand that I will remain **blocked from receiving transcripts or any other University Services** until this loan is paid in full.

*I understand that accounts are reported to a national **credit bureau (s)** on a monthly basis based on the payment status and delinquent accounts may be **placed with an external collection agency** which will increase the debt by up to 33 1/3% for first placements and 66 2/3% for second placements.

*I understand that to insure that I receive a monthly billing statement I must notify Student Debt Management (at the address or phone number listed below) of any **address changes**.

Furthermore, I understand that it is my responsibility to make monthly payments whether or not I receive a billing statement.

*I understand that this Temporary Repayment Agreement **does not nullify the terms of the promissory note** (if debt is arising from a loan) I have signed. It is a renegotiated payment plan offered due to the fact that I did not honor the terms of my promissory note.

*I understand that I may only renegotiate the terms of this loan (s) once and terms must be according to Student Business Services procedures.

*I understand and agree to the terms of this Temporary Repayment Agreement.

State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.

Signature: _____

Date: _____

Approved by: _____

Date: _____

Last revised: February 8, 2008

Physical address:
750 Agronomy Rd. Suite 2801
6001 TAMU
College Station, TX 77843-6001

Mailing address:
P.O. Box 40004
College Station, TX 77842-4004

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