

### College Saving/State Prepaid Tuition 529 Plan Payment Extension Request

Use this form to request additional time for a College Saving/State Prepaid Tuition 529 plan payment to arrive and post to your student account. Submit a separate form for each semester by the deadline specified below.

Attach a verification that your payment request has been made. It should include your name, the plan's name, payment amount and anticipated date of payment.

Student Name: \_\_\_\_\_ Andrew ID: \_\_\_\_\_

Enter semester to be covered by the delayed payment:

Fall (submit form by July 15 preceding the fall semester)

Spring (submit form by December 15 preceding the spring semester)

Summer (submit form by May 15 preceding the summer semester)

Enter calendar year of that semester:

(i.e., 2023)

### PAYMENT SPECIFICATIONS

My payment is expected to arrive at CMU by this date: \_\_\_\_\_ for: \$ \_\_\_\_\_  
(mm/dd/yyyy)

By selecting the boxes below, I indicate that I have read and understand the associated statements:

- My plan payment request verification is attached.** It includes my name, plan name, payment amount and anticipated payment date.
- My payment must arrive before the semester ends, and before course registration week to permit registration for the following semester.
- If this payment plan is changed, canceled, or is not received by the date specified, I am responsible for any balance due to Carnegie Mellon University as outlined in the Student Financial Obligation terms ([www.cmu.edu/hub/billing/sfo](http://www.cmu.edu/hub/billing/sfo)).
- It is my responsibility to review my student account and furnish payment for any balance due in excess of this payment.
- Approval of this form is subject to Student Accounts Office review. If I do not receive notice of approval, I am responsible for making payment in full by the due date on my most recent invoice.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Handwritten Signature Required)

### OFFICE USE ONLY

Deferment of payment due date is:  Approved  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_