

**Atlantic Cape Community College
Chargeback Promissory Note**

I, _____ Student ID# _____

promise to submit to Atlantic Cape Community College, Mays Landing, NJ, a valid chargeback for the _____ 20 _____ semester OR pay the out-of-county tuition charges normally covered by the chargeback (if I am ineligible for chargeback assistance or if I do not submit the chargeback for any reason). This signed note is a legal contract between myself and Atlantic Cape Community College, subject to billing and collection, etc.

**Out-of-County
Tuition Charges
Amount***

Date

Signature of Student

***May be subject to change due to changes in registration**

County _____

Address _____

Note: Chargebacks are available from the chief fiscal officer of the home county of the student during the periods which vary from county to county. The student should verify with the chief fiscal officer of the home county **BEFORE REGISTERING** that he/she is eligible for the chargeback and the **FINAL DATE** that the chargeback forms are issued.

Copies:

White: Student

Yellow: Business Office