



Mercy
 Education Resource
 Center | Maximizing Potential

Payment Policy

Name: _____ Client Name: _____
 Address: _____
 Phone # _____ Date: _____

Fees: (Assessment \$1000), (Counseling \$85/hour), (Instruction \$45/hour at Mercy Education Resource Center, and \$55/hour off site).

Fees are due and payable prior to receiving services unless a special payment plan has been pre-arranged through the finance department.

Client payment required at point of service:

Assessment: \$50 Non-Refundable deposit required to schedule 1st appointment
 (Applied to total cost).
 \$475 due before testing begins
 \$475 due before or on day of final meeting

Instruction/Counseling: Payment or minimum co-pay due at time of service.

Please attach a copy of your 1040 tax return including W2 (s) & some form of verification of current income. (Financial assistance will NOT be considered without this information). Also, please inform us of any extraordinary financial obligations you may have.

<u>Service:</u>	<u>Full Assessment</u>	<u>Counseling</u>	<u>Instruction</u>
Fee:	\$1000	\$85	\$45/\$55
Minimum co-pay:	\$500	\$35	\$20/\$30
Requested - Financial Assistance:	\$ _____	\$ _____	\$ _____

Please indicate how payments will be made:

Payment: ___ Cash ___ Check ___ Visa/Mastercard

Card # _____ Expiration Date ___ / ___ / ___

Signature of cardholder _____

Special Payment Plan: _____

~ Signature ~ (person paying for services)

For Office Use Only:

Ability to Pay \$ _____ Financial Aid Granted \$ _____

Approved Denied by: _____ Acknowledgment Sent (date) _____



To: Financial Aid Applicants for 2011-2012
From: Terry Anderson, Executive Director
Subject: Guidelines for Applications

Financial assistance is granted by demonstrated need. The following are the guidelines used to determine need.

- 1) Financial resources.

- 2) Divorce/remarriage
 - a) We consider child support and alimony payments made and received.
 - b) Mercy Education Resource Center cannot be expected to subsidize a child's need for services provided by Mercy Education if the custodial parent and new spouse do not agree on this arrangement.

- 3) Number of children and other dependents in the family.



Financial Aid Policy

The primary purpose of financial aid is to provide assistance to clients/families, who without such aid would be unable to access the services provided by Mercy Education. Funding for financial aid is provided by the Sisters of Mercy, West Midwest Regional Community and Mercy Foundation.

1. Application for financial aid is included in registration packet.
2. Request for financial aid must be made and approved before service begins.
3. Evidence of financial status to include most recent 1040 with W2 (s), and evidence of current income.
4. Financial aid will be granted in form of: one time single award or capped ongoing support.
5. Client co-pay required at point of service:
 - Assessment:** 1/2 co-pay due at onset of service; remainder due at conclusion of service*.
 - Instruction/Counseling:** co-pay made at time of service.
6. Failure to make co-payment as required;
 1. First missed payment will generate a reminder call from the accountant.
 2. Second missed payment, client will receive written notice of service suspension until payments due are cleared.
 3. Failure to clear payments due within 15 days of written notification will result in forfeiture of remaining financial aid.

Client _____

Parent _____

Date _____

*Payment Plan Available

Reason for requesting financial aid

Amount of financial assistance requested \$_____. per session per assessment. (circle one)

This question **must** be answered. Please transfer this amount to the front application form.

Amount of financial aid requested does not guarantee that any amount will be granted.

Attach a copy of your MOST RECENT 1040 form including W2 (s)

<p>Evaluation will not be made without your 1040 tax form & Some form of verification of current income.</p>

❖ **Please read the following statements, then sign and date this form.**

- a) The information, which is included in this form, is true and accurate.
- b) If our financial status changes, we will contact Mercy Education Resource Center to renegotiate the terms of financial assistance. To fail to do so will jeopardize our award.
- c) If financial assistance is awarded to our family, we realize it is our responsibility to make payments on a current basis as stipulated by the fee schedule.
- d) Failure to meet your financial responsibility may result in termination of services.

I hereby state that all information is, to the best of my knowledge, true and accurate.

(One parent must sign.)

Signature

Date