**Registration Packet - MATH 157 Trigonometry**

Welcome to Truman State University’s Competency-Based Mathematics program! We hope you will find this learning experience to be both challenging and rewarding.

To get enrolled in the class with Truman State University, **you must complete all of the steps below**:

* **Step 1.** Give this **Registration Packet** to your parent/guardian and read through all of it with them.

Please keep this page to refer to in case you have questions later – it contains answers to most questions parents and students have as well as The Institute for Academic Outreach contact information.

* **Step 2.** Have your parent/guardian carefully read the ***Memorandum of Understanding*** ***Form*** on page 3 and 4 complete it.

If these forms are incomplete or not returned to us, we will be unable to enroll you in the course until these completed documents are on file.

* **Step 3.** Give the completed form to your high school teacher/counselor.
* **Step 4.** **(OPTIONAL)** Students may elect to sign up for the Flexible Payment Plan. If so, you will need to have your parent/guardian complete the ***Flexible Payment Agreement Form*** and return it to your teacher. You may also want your parent/guardian to complete the ***Waiver for Disclosure of Account Information*** so that we can provide your teacher with information about your tuition and fees if you fall behind on your payments. Your teacher can provide you with these forms.
* **Step 5.** Go to <http://institute.truman.edu/cbmapplication>, and follow the instructions to submit your online application.   
  + **Note:** Students may complete this step during class but will need to have their social security number available – please ask the teacher at your high school for assistance.
* **Step 6.** After you have completed your application, you will receive instructions from your teacher on how to set up your student account, pay your tuition, and download your software. Please wait to receive this information before doing anything further.

**Questions?**

Please contact Allison Owen at the Institute for Academic Outreach office at [institute@truman.edu](mailto:institute@truman.edu) or 660-785-5384 with any questions. If she is not available, please send us an email or leave a voicemail.   
  
You can also find more information on the program webpage, <http://institute.truman.edu/cbm>.

**What You Need to Know**

**Enrollment:**

Once the ***Memorandum of Understanding*** ***Form*** and your on-line ***Application*** have been submitted, you are responsible for paying the tuition. There are no refunds for any reason – even if you change your mind after your application is accepted.

**Withdrawing:**

You may withdraw from a Competency-Based Mathematics course at any time until the last day of the course. If you withdraw from the course, you **will not** receive a refund or waiver of payment responsibility - All bills must be paid in full.  Bills in arrears will be sent to collection. You will also not receive college credit, a grade, or a designation of the withdrawal on your transcript. Please visit http://institute.truman.edu/cbmwithdraw to review our late withdrawal procedures.  
  
To withdraw from the course, you must email or call the Institute for Academic Outreach at the number listed above and inform them of your desire to withdraw.

**Bills and Tuition Payment:**

You will not receive any paper bills in the mail. **Full payment of $200 is due by February 13, 2015.** Please do not attempt to pay until you receive your **Information Packet**. You and your parent/guardian are responsible for reading the **Information Packet** and completing the required tasks. If your account is not paid in full by **February 13th**, interest at a rate of 0.75% per month will begin accruing on your account and will continue to accrue each month until your balance is paid in full.

A $75 late fee will be added to your account if you do not pay your entire balance by **April 15th**. If it remains unpaid, it will go through Truman’s collection process then be sent to a collection agency with negative repercussions for your credit score. A “hold” will also be placed on the account preventing you from earning a grade, enrolling at Truman, or transferring credit until the account balance (including all outstanding charges and fees) has been paid in full.

**Software:**

Students who are new to the Competency-Based Mathematics program will receive instructions from their high school teacher on how to download the software once all students in the course have completed all of the steps in the Registration Packet. You will also receive a copy of the software on CD. Students who enroll in a second course in the program will use the same software and access code that they used for the first course, so be sure to keep this code handy.

**Grades:**

* Your Truman grade for the course will be the average of the highest score you received on each test for each section but you must receive at least 70% on each test to receive a passing grade for the course.
* You can retake each test to improve your score but only up to the date you will take the test for the next section.
* You will not receive a paper printout of your grades. Grades will be posted on your student account which you can access on TruView after you complete the class.
* If you do not complete the course or withdraw by the last day of class, you will get an F on your Truman Transcript.
* If you attend Truman, your grade in this course will be included in your Truman GPA.
* Keep in mind your high school grade for this course is assigned by your high school teacher at their discretion and may be different from your Truman grade, particularly if your teacher adds additional assignments or grades.

**Transcripts and Transferring Credit:**

If you pass the course, you may want to transfer the credit to a college or university. Contact the registrar at the schools you’re interested in to see if they accept credit for your Truman State University course in transfer. To request your transcript, visit <http://www.truman.edu/registrar/>. You will find the link on the left side of the page.

**Memorandum of Understanding**

**Instructions for Parents: Please read and sign the document below, and place your initials in the boxes next to the paragraphs as indicated. This section must be complete and signed before your child may enroll in a Truman Concurrent-Enrollment Course.**

|  |  |
| --- | --- |
| My minor child (insert name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is registering for a concurrent-enrollment course with Truman State University. By signing this document, I acknowledge that I am assuming financial responsibility for the payment of tuition for my child’s participation in this program and that I understand certain policies applying to his or her participation and/or later withdrawal from the program. As the responsible parents or guardian, my initials to the left of each statement below signify my understanding of, and agreement with, the policies detailed. | |
| **Parent Initials** | I agree to pay all tuition and fees when due to Truman State University (including, but not limited to, tuition, course fees, mandatory student fees, University Housing fees). I understand that my student’s eligibility to register for courses is expressly conditioned upon my agreement to pay all fees and tuition when due. I understand that I am personally responsible for payment of all sums when due, regardless of other possible sources of financial assistance (such as financial aid, additional parent contributors, school aid, etc.). |
| **Parent Initials** | I understand that my failure to pay any sums when due to Truman State University may result in interest and late fee(s) and may also result in the submission of my account for collection, in which event I agree to reimburse Truman State University the fees of any collection agency, which may be based on a percentage at a maximum of 35% of the debt, and all costs and expenses, including reasonable attorney’s fees, Truman incurs in such collection efforts. |
| **Parent Initials** | I understand that that failure to pay any sums due to Truman State University will result in the placement of a hold on my student’s Truman account until the account and all fees of collection, including payment of reasonable attorney’s fees, has been paid. A hold on my student’s account will prevent him or her from registering for courses and obtaining transcripts; and further, I understand that failure to pay my student’s account may result in the University filing an adverse report with the credit bureaus. If there is a dispute or problems with this agreement then the parties will follow the law of the State of Missouri. The University and its agents will utilize all contact information to collect any debt owed to the University, including but not limited to cell phone numbers and email addresses I have provided to the University. |
| **Document Continues on the Reverse Side of this Page 🡪** | |

|  |  |
| --- | --- |
| **Parent Initials** | I understand that the University uses email as an official method of communication with me and my student and that therefore I and/or my student am responsible for reading the emails I receive from the University on a timely basis. I further understand that I am responsible for keeping the University records up to date with my and/or my student’s current physical address, email addresses, and phone numbers. Upon ceasing enrollment at the University, for any reason, it is my responsibility to provide the University with updated contact information for purposes of continued communication regarding any amounts that remain due and owing to the University. |
| **Parent Initials** | I acknowledge that I (or my child) must supply their social security number during the application process in order to comply with federal tax laws, and that failure to supply the number (either through the application, or through other alternatives made available to the student) will result in a hold being placed on the student’s academic record. Such numbers are stored securely by the University, in conformity with best practices for handling personal identifying information, and shall not be shared with offices or organizations outside of Truman State University except where required by law. |
| **Parent Initials** | I acknowledge that I understand that published university deadlines for refunds and withdrawals apply to students participating in dual credit courses. These deadlines are shared with students in the program and are published on Truman’s dual credit website. I understand that it is my responsibility to work with my child to make sure these deadlines are met. Students who wish to withdraw, but fail to meet published deadlines, will be fully responsible for paying tuition, as applicable, and cannot remove undesired course grades. |
| **Parent Initials** | I acknowledge that, under the Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. Sec. 1232g; 34 CFR Part 22), parents do not have a right to review student records when a high school student is enrolled in post-secondary (college) coursework, and further understand that Truman is bound by federal law to uphold these student rights. However, students are fully capable of accessing their academic records online and can show parents relevant information at any time, upon a parent’s request, should they so choose. |

Parent Name: \_\_\_\_ Parent Signature: **(Please print legibly)**

Parent Email: \_\_\_\_ Parent Phone: \_ \_\_ \_\_\_\_\_\_\_ Date: \_\_\_\_\_\_

**(Please print legibly)**

**Your student’s registration will not be complete until this form is submitted by your teacher/counselor to the Institute for Academic Outreach Office.**

**Truman State University - Flexible Payment Plan Agreement**

Enrollment is not complete until payment of fees has been arranged. Once you select a payment method, that method will remain in effect throughout your attendance at Truman State University unless you rescind the agreement in writing, OR UNLESS THIS AGREEMENT IS RESCINDED BY TRUMAN STATE UNIVERSITY. Neglecting to arrange for payment by the first week of classes either by signing up for the Truman Flexible Payment Plan, or by paying your fees in full under the Standard Plan, will result in cancellation of enrollment with a $20 late enrollment penalty required to re-enroll.

**Method 1: Truman Flexible Payment Plan**: If this payment method is selected, the student must sign and return this agreement form. The first bill for each term will be emailed to the student’s Truman e-mail. **25% of each semester’s fees are due by the 15th of the month in which the course began (or the one immediately following if the course begins after the 15th).** Accounts not paid in full by the last due date; November 15 for fall, April 15 for spring, and July 1 for summer will be assessed a $75 late penalty. ***This payment method will incur finance charges equal to one half percent (1/2%) per month (6%) per year on the unpaid balance.***

**Method 2: Standard Plan:** The Standard Plan will be assigned to students who do not select the Truman Flexible Payment plan by signing and returning this agreement. The amount calculated as the student’s responsibility must be paid in full by the due date on the bill. Additional charges incurred during the semester must be paid by the due date designated on the bill. Accounts not paid in full by the last due date; November 15 for fall, April 15 for spring, and July 1 for summer will be assessed a $75 late penalty. ***This payment method will incur finance charges equal to three quarter percent (3/4%) per month (9%) per year on the unpaid balance.***

*Billing Rights*: Under the Fair Credit Billing Act, if you believe your bill is incorrect, or if you require more information regarding a transaction on your bill, write to Truman State University at the address listed on your bill. The University must hear from you no later than 60 days after you receive the first bill on which the error or problem appeared. You can telephone Truman State University, but doing so will not preserve your rights. In your letter, provide your name, account number, and the dollar amount of the suspected error. Describe the error and explain why you believe there is an error. You are not required to pay any questioned amount during the investigation; however, you are obligated to pay the portion of your bill not in question. During the investigation, the University cannot report you as delinquent or take any action to collect the amount in question.

*Default*: If payment is not made by the deadlines established, the University has the right to take steps to collect the balance including but not limited to the following: denial of registration; withholding transcripts and diploma until the balance is paid; referral of account to a collection agency; legal action to collect the balance due. The student (or responsible parent) will incur the cost of collection for defaulted accounts, which includes reasonable collection agency fee, and/or attorney fees. The University has the right to release information about the account to those concerned with collecting the balance due.

*Change in Terms:* The University reserves the right to amend these Terms and Conditions without securing a new agreement. The University will notify student of any changes in interest, or fees in advance of the change. The option to pay in full always exists. If unpaid, the student is bound by the changes.

I will notify the University promptly of change in my address. The University will provide the first statement for each term by mail to the student’s permanent address. Subsequent monthly bills will be sent via E-mail to students at their official campus E-mail address. It is the student’s responsibility to forward their bill or print and mail a copy to their parents or other persons needing a copy of the bill.

**I understand that If I do not sign and return the payment agreement for Truman’s Flexible Payment Plan**, then I am agreeing to pay my fees by the end of the first week of classes for each semester that I am enrolled, known as the Standard Plan, as explained in Method 2 above.

**My signature on this agreement means that I have read this agreement, including all terms and conditions, and I am electing to pay under the terms outlined in Method 1 above**. This agreement will remain in effect throughout my attendance at Truman State University, unless I rescind this agreement in writing, OR UNLESS THIS AGREEMENT IS RESCINDED BY TRUMAN STATE UNIVERSITY. I also authorize Truman State University to communicate with my parents/guardian regarding payment of fees. The University recommends that you retain a copy of this agreement. Copies are available on line at <http://businessoffice.truman.edu/forms/>. **SIGN AND** **RETURN THIS FORM to address listed above.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Last Name Student First Name** **M Initial Student Signature Student’s SS#**

**PLEASE PRINT CLEARLY**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent Last Name Parent First Name** **M Initial**  **Parent Signature Date**

**Waiver for Disclosure of Account Information**

**(For the Flexible Payment Plan)**

I (Parent Name - **PLEASE PRINT**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ authorize Truman State University and its employees to disclose to faculty and staff of Smithville High School the balance of my son or daughter’s Truman account (tuition and fees) as part of the Competency-Based Mathematics Program. I understand that such disclosure will only occur in the event that my payments are past-due, per the terms of the Flexible Payment Plan, and that such disclosure will be limited to the name of the student, the amount owed, and any due dates missed. I further understand that the purpose of such disclosure is to enable the school district to recover the portion of my son or daughter’s tuition that is used to fund the support services provided by teachers and staff of the school.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Student Enrolling in Competency-Based Mathematics

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**Disclosure**

**This waiver allows the Institute for Academic Outreach to inform your student’s teacher when their tuition bills are past due or unpaid so that they may provide a friendly and discrete reminder to the student to pay their bill. Under the Family Educational Rights and Privacy Act, known as FERPA, Truman State University has no automatic right to share information about student’s tuition payments to officials or teachers at your school. However, parents are strongly encouraged to sign this waiver and either give it to their student’s teacher or send it to the Institute for Academic Outreach office via mail, scan, or fax to help prevent them from missing payment deadlines and having to pay late fees and additional interest.**