

PROMISSORY NOTE

For Office Use Only
TERM CODE:

(Standard)

INSTRUCTIONS:

- Fill out form and return to the cashier's office in person, by fax, email or mail (see below).
- If you email or fax your promissory note, it will not be processed to your account until we receive your initial down payment.
- If your balance is \$250 or more, a 10% down payment is required. Your installment payments must be greater or equal to your down payment.
- If your balance is \$250 or less, a \$25 down payment is required. Your installment payments must be \$25 or more.

Name:	_ Student ID #	:		
Phone #:		Email Address:		
Current Address:	City:	State:	Zip code:	
I agree to the following terms of this Promisso	ory Note:			
I understand there will be a hold on my account and account me from registering for future terms and access to my good Also, I understand if I do not comply with the payment the event that my account is turned over to collections, rate, on the outstanding balance.	grades. terms below, my acco	unt will be turned ove	r to a collection agency. In	
Term/Year Owed: (e	example: Spring 20	15)		
Amount Owed: \$				
Down Payment: \$				
Balance Owed: \$				
One-time payment of remaining balance	e \$		e paid within the next 30 days)	
I would like to make payments of \$		weekly bi	-weekly monthly	
My installme	ent payments will l	pegin on this date: _		
Student Signature:		Date:		
Authorized CNM Signature:		Date:		
Cashiers Phone: 505.224.3471 Cashiers Fax: 505.242.3877 Cashiers Email: cnmcashiers@cnm.edu Mailing Address: CNM, Attn: Cashiers Office, P	PO Box 4586, Albu	querque, NM 8719	96	