

Infant/Toddler Certificate Employer Agreement Payment Plan

For employees who are receiving SDCDA Scholarship or paying a portion of tuition

Program Name:

Billing Address:

Contact Name:

Student:

We, _____, agree to pay \$200.00 towards the Infant/Toddler Certificate program for the following students listed below

- _____ \$200.00
(name of participating employee)

Total Amount: \$200.00

Please check the plan which best meets your needs as an employer:

- We have chosen to pay \$200.00 towards the Infant/Toddler Certificate program costs to be paid in full by ___/___/___.
- We have chosen to receive a payment book and make monthly payments due by the First of each month.

As an employer, I understand that if the above mentioned student decides to no longer attend Infant/Toddler Certificate/CDA classes, or does not complete the Infant/Toddler Certificate process, that our program will still be responsible for the payment up to the date that student drops the Infant/Toddler Certificate process. In the event that the employer has chosen to pay the entire Infant/Toddler Certificate program costs in one lump sum, and a student does not complete the program, CHILD Services will issue a credit to the employer's account.

Director or Program Financial Officer

Date