



# Early College Initiatives Financial Responsibility Form

## Complete the following information

Incomplete forms cannot be processed – please print clearly

Student's Full Name: \_\_\_\_\_

Student's Date of Birth \_\_\_\_\_  
MM DD YYYY

High School: \_\_\_\_\_

Graduation Year: \_\_\_\_\_

Parent/Legal Guardian Name: \_\_\_\_\_

Parent/Legal Guardian Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Parent/Legal Guardian Phone: \_\_\_\_\_

Parent/Legal Guardian Email: \_\_\_\_\_

## Information

EOU Early College Initiatives provides the opportunity for students to participate in college-level courses and earn credits while still in high school.

**Please submit this form by one of the following options:**

**SCAN AND SUBMIT TO:** [eci@eou.edu](mailto:eci@eou.edu)

**OR MAIL TO:**

Eastern Oregon University  
c/o ECI Admissions Office  
One University Boulevard  
La Grande, OR 97850-2807

Submission of the EOU Early College Initiatives Financial Responsibility form obligates the legal guardian to pay tuition and fees incurred by the student listed above who registered for classes through EOU. I acknowledge the student listed above is registered for classes at EOU and there is a financial obligation for the courses. I further acknowledge I am accepting all financial responsibility for any balance owed to Eastern Oregon University accrued by the student listed above.

The extension of credit, and provision of services may be withheld from any student with a past-due balance. \_\_\_\_\_ **Parent/Legal Guardian Initial.**

I will keep the address current at EOU and notify EOU within 30 days if the student has changed high schools. \_\_\_\_\_ **Parent/Legal Guardian Initial.**

Signature (Parent/Legal guardian): \_\_\_\_\_ Date: \_\_\_\_\_