OSU Expanded Options Program
Billing Application
20XX – 20XX Academic Year

School District: __________________________ Date: __________________

Billing Contact Person: ______________________________________________________________________

Phone: ______________________ E-mail: __________________________________________________

Address: _________________________________________________________________________________
_________________________________________________________________________________________

Oregon State University’s Expanded Option Program (XOP) supports Oregon districts who enroll eligible Senate Bill 300 students in OSU courses. This application covers the financial agreement between OSU and the district for the implementation of this program for the noted academic year. This application is in addition to the OSU Expanded Option Program Agreement that covers the general responsibilities of OSU and the district in the implementation of the program.

OSU agrees to admit1 and provide eligible courses for eligible students from the district and the district agrees to be responsible for the expenses incurred by the students as per OAR 581-022-1362 (4)2. OSU’s Expanded Option contact person3 will work with the district’s Expanded Option Contact Person to identify XOP students and confirm their course schedule.

OSU has posted Tuition & Fee information on the XOP website4 to assist in estimating these costs. In addition to these costs, the district may incur student printing and photocopy charges. OSU will invoice the district for all above mentioned costs at the end of each term although late printing charges may be invoiced after the term. The OSU Bookstore is a private company and as such will do a separate billing for purchased textbooks.

We the undersigned, hereby agree to the above stated terms. Approved by:

______________________________________________________  _____________________
Authorized District Signature       Date

______________________________________________________  _____________________
Authorized OSU Signature       Date

After completing this form, please fax (541-737-6124) or mail to: Joan Oakes, Extended Campus, 4943 The Valley Library, Corvallis, OR 97331. A signed copy will be returned.

1 Per OAR 581-022-1360(2)(g), OSU reserves the right to not accept an XOP student.

2 Provide public funding to the eligible post-secondary institutions for educational services to eligible students to offset the cost of tuition, fees, textbooks, equipment and materials for students who participate in the Expanded Options Program.

3 Joan Oakes, 541-737-4166, joan.oakes@oregonstate.edu

4 http://ecampus.oregonstate.edu/online-degrees/k12/xop/