Student Payments

1. Go to Colleague Self-Service page and select "Student Finance."

| Hello, Welcome to Colleague Self-Service! Choose a category to get started. | | | |
|--|---|--|--|
| Student Finance Here you can view your latest statement and make a payment online. | B Financial Aid Here you can access financial aid data, forms, etc. | | |
| Student Planning Here you can search for courses, plan your terms, and schedule & register your course sections. | Course Catalog Here you can view and search the course catalog. | | |
| Grades Here you can view your grades by term. | Graduation Overview Here you can view and submit a graduation application. | | |
| Enrollment Verifications Here you can view and request an enrollment verification. | Transcript Requests Here you can view and request a transcript. | | |
| Academic Attendance Here you can view your attendances by term. | | | |

2. Click on "Make a Payment."

| Einancial Information · Student Finance · Account Summary | | | |
|---|------------|-----------------------|-----------------------------|
| Account Summary View a summary of your account | | | |
| Account Overview | | | Helpful Links |
| Amount Due 8/15/2024 | \$6,508.00 | | Rivier Tuition Fee Schedule |
| + Amount Overdue | \$0.00 | | |
| = Total Amount Due | \$6,508.00 | <u>Make a Payment</u> | |
| Total Account Balance | \$6,508.00 | Account Activity | |
| Fail 2024 | \$6,508.00 | | |

3. Select "Continue to Payment Center."



- 4. Click on "Make a Payment."
 - a. This is also where you can select a payment plan.



- 5. Select the payment option you'd like to pay.
 - a. Current Account Balance total balance you owe.
 - b. Pay by Term will be broken down in payments by term.

Account Payment

| Amount | Method | Confirmation | Receipt |
|-------------------------|--------|---|---------|
| Payment Date: 4/18/24 | | | |
| Select Payment Option | | | |
| Current Account Balance | | O Pay By Term Select which semester terms to pay | |

6. Add the amount you wish to pay.

Current Account Balance

Enter payment amount and click 'Add' to include in the payment total.



7. Select "Continue" if your payment total is correct.

| Current Account Balance (Student Account) | \$3,000.00 |
|---|------------|
| Additional Item Total | \$0.00 |
| Payment Total | \$3,000.00 |
| | |



8. Select the Method of Payment.



- b. Other Payment Methods
- c. Electronic Checking (Checking/Savings) Account for banking information.



- 9. Fill out proper information for payment.
 - a. Credit Card Payment.
 - b. Electronic Checking (Checking/Savings)

| Payment Information | | |
|---------------------|---------------------------|-----------------------|
| Payment Dat | e | 4/18/24 |
| Term | Account | Amount |
| Fall 2024 | Student Account | \$3,000.00 |
| Total Paymer | nt Amount | \$3,000.00 |
| | | Change Amount |
| | | |
| Selected Pa | ayment Method | |
| Account: | Account: TOUCHNET PAYPATH | |
| | | Change Payment Method |

10. Hit "Continue."

| Transaction Details | | |
|---|-------------------------------|-----------------------------|
| Student ID 0000734 - Student Account | Term to credit FA24 | Amount \$3,000.00 |
| PayPath Payment Service accepts: | Decard Comp | |
| | | |

Cancel

11. Hit "Continue" again if this payment amount is correct.



12. Fill out proper information for Credit Card or Checking/Savings account.

| Payment Card Information | | |
|---|--------------------------|-----------------------------|
| Name on card: | | |
| | Please enter the name of | is it appears on your card. |
| Card account number: | | |
| Card expiration date: | MM | YYYY |
| Card security code: | CVV | What is this? |
| Billing Address | | |
| Check if address is outside of the United States: | | |
| Billing address: | | |
| City: | | |
| State: | New Hampshire (NH) | ~ |
| Zip code: | | |
| Email address: | | |
| Confirm email address: | | |
| Phone number: (optional) | | |

b. Checking/Savings account.

a. Credit Card

i. Saving/Refund options are optional.

| Amount: | \$3,000.00 | | | |
|---|---|---|--|--|
| Method:* | Electronic CI | neck (checking/savings) | | |
| Account Info | ormation | | Billing Information | |
| * Indicates require | d fields | | *Name on account: | |
| You can use any Do not enter oth | personal checking or s ner accounts, such as c | avings account. orporate account numbers, credit | *Billing address: | |
| cards, home equity, or traveler's checks. Do not enter debit card numbers. Instead, enter the complete routing | | Billing address line two: | | |
| number and ban | nk account number as f | ound on a personal check. | *City: | |
| *Account type: | | Select account type | *State: | Select State 🗸 |
| *Routing number: | (Example) | | *Postal Code: | |
| *Bank account nun | nber: | | | |
| *Confirm account i | number: | | Option to Save | |
| | | | Save this payment method for | future use |
| | | | Save payment method as: (example My Checking) | |
| | | | Refund Options | |
| | | | Only one account can be designa | ted to receive refunds. |
| | | | Check here if you would like re | funds to be deposited into this account. |

13. Agree to the terms and conditions and then select "Submit Payment."

Please review the transaction details and agree to the terms and conditions below. Clicking Submit Payment will finalize your transaction.

| Payment to Rivier University: | \$3,000.00 |
|--|---|
| PayPath Payment Service Fee | \$88.50 |
| Total payment amount: | \$3,088.50 |
| School name: | Rivier University |
| Payer name: | Test Student |
| Billing address: | 420 Main Street |
| City: | Nashu |
| State: | NH |
| Zip code: | 03060 |
| Email address: | test1@rivier.edu |
| Phone number: | Not entered |
| Card account number: | xxxxxxxxxx5454 |
| Browser internet address: | 66.251.112.229 |
| Business correspondence address: | TOUCHNET INFORMATION SYSTEMS INC 9801 RENNER BLVD SUITE 150 LENEXA, KS 66219 UNITED STATES |
| Terms and Conditions | |
| I hereby authorize charges totaling \$3,088.50 via my credit credit/debit card and is not refundable under any circumst | /debit card. I understand that a PayPath Payment Service fee of \$88.50 will be charged to my ances. |
| I agree to the terms and conditions. | |
| | Change Information Cancel Submit Payment |

14. Receive receipt for payment.