

Sponsorship authorisation

Payment of tuition fees by a sponsoring organisation



This form must be completed and returned to:

Income Office, University of Bristol, Senate House, Tyndall Avenue, Bristol BS8 1TH.

- You should complete this form if your tuition fees are to be paid on your behalf by a sponsor.
- Organisations permitted to act as sponsors include government departments, charities, companies and partnerships.
- The University will continue to recognise an organisation as your sponsor only if payments are made promptly as agreed below.
- Please return this form as soon as possible or bring it with you when you register with the University, signed and stamped by your sponsor's authorised representative.
- **Please complete the details below in CAPITAL LETTERS.**

Please note that this form is not applicable to students taking out a full tuition fee loan from the Student Loans Company or those whose fees are being paid by a UK Research Council.

STUDENT INFORMATION

Surname:	Home address:
First name:	
Course title:	
University student number: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Daytime telephone:	Postcode:

SPONSOR INFORMATION

Sponsorship for period: From year: 20 __ to year: 20 __	Full postal address to which invoice should be sent:
Name of company, partnership or other organisation:	
Type of organisation:	
Reference/purchase order no:	Postcode:

UNDERTAKING TO PAY FEES

(To be completed by an authorised representative of the sponsoring organisation)

We agree to be responsible for the payment of student fees as indicated below for the above-named student.

Fees will be paid within 30 days of receipt of a University invoice.

Sponsor student for all course fees: <input type="checkbox"/>	Sponsor student for amount: £ <input type="text"/> or % <input type="text"/>
Sponsor student per module: <input type="checkbox"/>	Number of modules: <input type="text"/>
Name:	Position:
Telephone:	Fax:
Email:	
Signature:	Date:

OFFICIAL STAMP OF THE SPONSORING ORGANISATION:

INCOME OFFICE USE ONLY:
Sponsor no:
New sponsor: <input type="checkbox"/> Yes <input type="checkbox"/> No