

Tuition Sponsorship Application Form for Continuing Studies Williams Lake
 (One form per student)

A. Sponsor Details

 Name: _____
 Address: _____
 City: _____ Postal Code: _____
 Telephone: _____ Fax: _____

B. Student Details

 Last Name: _____ First Name: _____
 Previous Last Name: _____

Citizenship Status

- Canadian
 Permanent Resident/
 Student Authorization/Student visa
 Non-Canadian, No Visa Status
 Live in Caregiver
 Non-Canadian, Status Unknown

Ancestry & Affiliation – An Aboriginal person is identified in accordance to the Constitution Act of 1982, Part II, Section 35(2) as “an Indian, Metis or Inuit person of Canada.” If you wish to identify yourself as an Aboriginal person, for statistical purposes, we invite you to select one or more of the three options that best describe your Aboriginal identity.

- First Nation (Status, Treaty and non-Treaty)
 Metis
 Inuit

 Student Number (7 digits or 9 digits): _____ Date of Birth: _____
 Address: _____
 City: _____ Postal Code: _____
 Telephone: _____ Student e-mail: _____

C. Coverage by Sponsor

Dates	Course Name	Course Fee	Additional Fee(s)	Total
Total Fees				

D. Sponsor’s Approval

 Sponsor’s name and title (print clearly): _____
 Sponsor’s Signature: _____

By signing this form, sponsor is acknowledging that they have read and understand the Sponsor’s Obligations and Responsibilities and the sponsor agrees to comply with the terms of the agreement. Please see:

http://www.tru.ca/_shared/assets/sponsors_obligations28581.pdf

Sponsors will continue to be able to pay for tuition and fees on behalf of students, but sponsors will not receive a specific bill from TRU. Sponsors will receive a copy of the student’s Registration Data Form, stamped “Invoice”. TRU will be eliminating the third party billing process for tuition, fees and material charges incurred by sponsored students.

E. Student’s Approval

I, _____ have read and understand “Sponsored Student’s Obligations and Responsibilities”, and that I **am responsible for my account balance at all times.**

http://www.tru.ca/_shared/assets/sponsored_students28580.pdf

In the event that I withdraw from the course(s) (within one week of the course start date), or the course is cancelled, I give Thompson Rivers University permission to refund the paid tuition for the above named course(s) to the above named sponsor.

I, _____ authorize Thompson Rivers University to disclose any and all Information regarding my training program to the above mentioned Sponsor, including attendance reports, proof of payment, progress, completion, and course changes.

Please bring proof of payment to class. **Certificates will not be issued until student’s account is paid in full.**

Student’s Signature: _____ Date of Application: _____