

Letter of Sponsorship to TRU-OL

Please print

1. Sponsor Agency / Group: _____
Address: _____
City / Town: _____ Postal Code: _____
Phone Number: _____ Fax Number: _____
Attention: _____

2. Student The agency / group named above confirms sponsorship of:
(Full legal name)

Surname First Middle

Address

City Postal Code

(Student No. or Social Insurance No.) Date of Birth

Home Telephone Bus. Telephone Email

3. Program (if applicable) _____
(Name of Program)

4. Courses _____

5. Dates For the period of time:
_____ to _____
(month) (day) (year) (month) (day) (year)

6. Costs The sponsor agrees the costs they are responsible for include:
(Check list please) Program Application Fee: \$ _____ Official Transcript: \$ _____
Tuition: (including administration, technology and miscellaneous fees) \$ _____
Textbooks: \$ _____ Total Sponsored: \$ _____

(Authorized Sponsor Signature)

(Title / Position)

7. Sponsored Student – Waiver Form I, _____, do hereby authorize TRU to release any
(student name)
information regarding attendance, progress and grades, upon request, to the above named sponsor.

Signature of Student: _____ **Date:** _____

TRU cannot release any information unless student has signed this waiver.