

Sponsorship Form – SP1

Sponsorship Liability & Responsibility

Sponsors/Employers/Companies completing this form accept full liability and responsibility for the payment of the fees type as indicated on the SP1 Sponsorship Details form below/overleaf. This fully completed form must be returned to **Student Fees, Student Services Centre, George Thomas Building No.37, University of Southampton SO17 1BJ** by Monday 3rd October 2011. Failure to do so will result in the fee liability and responsibility remaining with the student. Please be aware a separate form should be completed for each period of study unless otherwise indicated on the SP1 Sponsorship Details form below/overleaf. If an official sponsorship letter has already been provided stating all the relevant information, this form will not require completion. An electronic version of this form is available at http://www.soton.ac.uk/study/feesandfunding/sponsor_form_sp1.pdf.

This document, once signed, confirms your contractual obligation to pay fees for the named student(s) on the Sponsorship Details Form for the period stated. It is therefore recommended you form your own agreement with the student to cover his/her obligation to yourselves, should he/she withdraw from the course/programme or leave your employment. Prior to signing this document, please be aware of the University's Tuition Fees and Halls of Residence Fees Policy concerning fees charged. This can be viewed at www.soton.ac.uk/study/feesandfunding for undergraduates or <http://www.soton.ac.uk/postgraduate/feesandfunding/postgradfeesfunding.html> for postgraduates.

In consideration of the University of Southampton providing Tuition and/or Halls of Residence to the student(s) named on the SP1 Sponsorship Details form. I/We accept full liability and responsibility for payment of the Tuition Fees and/or Halls of Residence Fees and agree to pay in full within 30 days of invoice date. In the event of an Employer being a Limited Company, I confirm that I am authorised by my Employers to enter into this contract.

Signature of Employer/Authorised Signatory

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Full Name of Signatory.....

Telephone No:.....

E-mail Address:.....

Date form Completed

Official Stamp of Sponsor/Company

SP1 – Sponsorship Details Form

Student Information

Title	Forename(s)	Surname	Student ID No.	Year of Study

Sponsor/Company Information

Sponsor/Company Name	
Sponsor/Company Address	
Postal Code	
Contact Name	
Contact Telephone No.	
Fax Number	
Contact E-mail Address	
Purchase Order No. / Reference	
Billing Address	
Billing Postal Code	

Financial Sponsorship Information

Sponsorship type	Period of Sponsorship	Amount of Sponsorship
Tuition	From: To:	£
Hall of Residence	From: To:	£

Signature of Employer/ Authorised signatory

Date:

Official Stamp of Sponsor/Company

Form SP1 – March 2011