

Employer Sponsorship Form

This is an agreement between the Employer and AccountancySchool.ie, whereby the employer accepts full responsibility of the payment of fees for the student registered on accountancy School Courses.

Student Details

Student Name:			
Student Address:			
Student E-mail :			
Student Phone No.:			
Order No.:		Sponsorship Amount:	
Subject:			
Exam Sitting:			

Employer Details / Invoice Details

Contact Name:			
Company Name:			
Email Address:			
Invoice Address:			
		Phone No.:	
PO No. (if required)			

This form is not a Credit application form and must be approved by our finance department.



Declaration:

- I. I the employer, or on behalf of the employer, hereby declares that he/she/company will be responsible to pay the amount mentioned in this sponsorship form. No refunds will be issued once the course has started, Full course fees are due whether or not the student completes the course.

- II. I accept that, if the sponsored student withdraws from a course or leaves the sponsor's employment, the Student must ensure that the Student Fees have been paid in full by the Company, Failure to do so will result in the Student being liable for the outstanding fees.

- III. I confirm that I hold the position stated below and that in that capacity I have authority to bind the sponsor by signing this form.

Authorised signature:	
Print Name here:	
Position within the Organisation:	
Company Stamp:	
	Date:

Students Signature:	
Date:	