

Letter of Sponsorship to TRU-OL



TRU-OL Student Services
805 TRU Way,
Kamloops, BC V2C 0C8
truopen.ca
Email: **student@tru.ca**
Fax: 250-852-6405



TRU will not invoice your sponsor directly. Sponsored students are responsible for the outstanding balance on their student account at all times. Students must communicate details of charges to their sponsor and arrange for payment of fees. Students may obtain account information through myTRU.

SPONSOR

AGENCY/GROUP	
MAILING ADDRESS (include suite number if applicable)	
CITY / TOWN / VILLAGE	PROVINCE / STATE
POSTAL CODE / ZIP CODE	
PRIMARY TELEPHONE NUMBER	EMAIL ADDRESS (print clearly)
FAX NUMBER	ATTENTION/CONTACT

The AGENCY/GROUP named above confirms sponsorship of this STUDENT:

TRU-OL STUDENT NUMBER

"T" FOLLOWED BY EIGHT DIGITS T	DATE OF BIRTH (mm/dd/year)
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SURNAME (legal)	FIRST NAME (legal)	FULL MIDDLE NAME(S) (legal)
MAILING ADDRESS (include suite number if applicable)	PROVINCE / STATE	POSTAL CODE / ZIP CODE
CITY / TOWN / VILLAGE	HOME TELEPHONE	
EMAIL ADDRESS (print clearly)	BUSINESS TELEPHONE	

PROGRAM (if sponsoring entire program)

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COURSES

COURSE NUMBER	COURSE NAME	COURSE NUMBER	COURSE NAME
COURSE NUMBER	COURSE NAME	COURSE NUMBER	COURSE NAME

DATES (For this period of time)

	to	
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MMM-DD-YY (E.G. SEP-01-17)

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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

SPONSORED STUDENT – WAIVER FORM

I, _____, do hereby authorize TRU to release any information regarding attendance, progress and grades, upon request, to the above named sponsor.	
STUDENT'S SIGNATURE	DATE