SPONSOR AUTHORISATION INTERNAL



This Internal Sponsor Form (A89) must be completed by any University Department in order to sponsor a student (ie. pay the fees) undertaking a course at Victoria University.

at victoria Offiversity.															
By filling in this form, the nominated costs	will be deducted from the	stated co	ost ce	entre.											
A student acknowledgment letter must be	completed and sent to the	student													
Please write in BLOCK LETTERS using a	a black or blue pen.														
SECTION A - STUDENT DETAILS															_
STUDENT NAME:															
					TE OF	F BIF	RTH:								
SECTION B - COLLEGE/DEPARTMENT DE	ΓAILS														
COLLEGE/DEPARTMENT:															
DI III DINIO/DOOM						CATI	ON:								
NAME OF CONTACT DEDCOM															
PHONE:			Е	MAIL	ADDF	RESS	S:								
FEES TO BE SPONSORED (Please indicate the fees that the spor for all other fees which the sponsor hat Tuition Fees Materials and Ancillary fees (Materials and Ancillary fees (SAF) Student amenities fee (SAF) VET-RPL Fees All of the above fees OR Amount (\$ amount or % value)	nsor will pay – the student w s not agreed to pay) aterial fees with GST)	vill be lia	ble	□ Du	uratior cadem	n of S nic Ye Study	ponso ear Period	red C	Course	e					_
INVOICING SPONSOR THROUGH VU	CONNECT				_			_ [1	1	<u>2</u>	7	<u>5</u>
COLLEGE SPONSORING STUDENT					_			_			<u>'</u>	<u>+</u> 4	<u> =</u> 1	<u>-</u> 0	7
COLLEGE SPONSORING STAFF (HEC					_			_			<u>,</u> /	<u>-</u> <u>3</u>	<u>-</u> 8	<u>0</u>	8
COLLEGE SPONSORING STAFF FOR					_			_			<u>,</u> /	3	8	<u>5</u>	8

SECTION D - SPONSOR AUTHORISATION I confirm that I have the appropriate financial delegation and am authorised to sign this commitment on behalf of the named College/Department. NAME: PHONE: POSITION TITLE: SIGNATURE: DATE:

<	FEES PROCESSING						
FICE USE ONLY	☐ Sponsor code entered on student record ☐ Sponsor invoice raised	Copy of Sponsor invoice sent to Organisation					
Ö	PROCESSED BY:	DATE:					