

Sponsor Information	Student Information	
Sponsor Name	Term/Semester	
Authorized Sponsor Rep.	Student Name	
Billing Address	Address	
City, State, Zip	City, State, Zip	
Phone	Phone	
Email	Email	
Tax ID#	Student ID#	
	Enrollment items and dollar amounts of sponsorship of	coverage
	e. Write "required" if no max amount.	
Tuition \$	\$	
Fees \$		
Books \$		
Bookstore Supplies \$		·

clothing, etc.)

Special Restrictions: List items specifically excluded from coverage (No post-agreement exclusions without resubmitted signed agreement).			

By signing this form, the Authorized Sponsor agrees to the following statements:

- The business accepts responsibility for payment of the student's tuition and fees as entered on this agreement.
- The student is a current employee of the sponsoring business.
- The business will receive an invoice after the drop/add period and before the end of the semester. Exact payment by company check will be remitted to the HCC cashier's office upon receipt.
- Completed forms must be received no later than ten (10) days prior to first day of class.
- The student must work at a North Carolina location. This Third Party Sponsorship Agreement form is only valid for the term/semester indicated. A new form must be completed and returned for each term/semester in which the student is enrolled.

The individual signing below hereby represents and warrants that they are duly authorized to execute and deliver this Agreement on behalf of the sponsoring organization.

Authorized Sponsor Rep (print name)	Authorized Sponsor Rep (signature)
Authorized Sponsor Rep (title)	Date