

SPONSORSHIP AUTHORISATION FORM



Confirmed Payment of tuition fees by Sponsoring Organisation

Please send this completed sponsorship authorisation form by return email to the iheed education advisor who is assisting you with your application submission or directly to: employersponsor@iheed.org

Explanatory notes:

- Please complete this form if your tuition fees are to be paid by a sponsor.
- Sponsors include employers, Government bodies, industry, charities or other partnerships.
- The sponsor status can only be recognised for those with confirmed sponsorship in place and tuition fees are settled in a timely manner in line with your specific payment plan.
- This completed form needs to be signed and stamped by the sponsor and returned by email.

STUDENT INFORMATION

Surname:			Home Address:
First Name:			
Course Title:			
Mobile Number (Include Country Code):			
			Postcode:
SPONSOR INFORMATION			
Programme Start Date:	From year: 20 to year: 20		Contact Email address for electronic invoice to be sent:
Qualification Title:	Paediatrics		
	Obstetrics & Gynaecology		Full postal address to which invoice should be sent:
	Dermatology		
	Medicine for Older Person		
	Infectious Diseases		
	Occupational Medicine		
Contact Name within Company, partnership or organisation:			Postcode:
UNDERTAKING TO PAY FEES (To be completed by an authorised representative of the sponsoring organisation)			
We agree to be responsible for the payment of student fees as indicated below for the above-named student. Fees will be paid within 30 days of receipt of an invoice from iheed .			
Sponsor student for all course fees:			Sponsor student for amount:
Sponsor student per module:			Number of modules:
Name:			Position:
Email:			
Telephone:			Date:
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OFFICIAL STAMP OF THE SPONSORING ORGANISATION:			SIGNATURE:
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