

## **EMPLOYER / SPONSOR AGREEMENT FOR STUDENT PROGRAMME FEES PAYMENT**

## **Student Details**

Total:

Name (Per Student Records):		
NRIC / Passport / Matriculation No.:		
Programme:		
I acknowledge that I have been enrolled SMU's regulations and policies. I Employer/Sponsor fails to pay the spudue date, I will be personally liable to forthwith.	undertake and acknowledge onsored portion of Programme Fe	that, if for any reason my es stated below by the invoice
If I fail to pay my Fees, SMU reserve without limitation, terminating my car	_	•
I acknowledge that in the case of term nor refund the fees paid/payable for have already been billed, under any of 15 days' notice period for sponsorship	invoices in relation to the paymer ircumstances whatsoever (including	nt of the Programme Fees, that
Student's Signature	I	Date
Sponsorship Details		
Programme Fees (Inclusive of GST)	Employer / Sponsor to Pay (S\$)	Student to Pay (S\$)
Tuition Fees		
Registration Fees		
Application Fees		
Others (pls indicate):		



## **Employer / Sponsor Details**

Organization Name:	
Company Registration Number:	
Organization Sub-Code:	
(For Government Entities)	
Contact Person Name:	
Contact Person Designation:	
Company Billing Address:	
Contact Number:	
Contact Email Address:	
·	enter into this Employer/Sponsor Agreement on behalf of ("Organization"). I agree on behalf of the o be paid by the Employer/Sponsor as stated on Page 1 by the SMU.
Fees even if the Student discontinues er	remain responsible for the sponsored portion of Programme nployment with the Organization and/or the sponsorship is /Sponsor, unless the Organization terminates this Agreement in writing.
adjust nor refund the fees paid/payable circumstances whatsoever (including ar sponsorship termination) in relation to the that is stated on Page 1. I agree that the o	ermination of this Employer/Sponsor Agreement, SMU will not for invoices already billed to the Organization under any invoices billed within the 15 days' notice period for e payment of the Programme Fees by the Employer/Sponsor onus and responsibility is solely on the Organization to arrange lirectly with the Student, if it wishes to do so.
Authorized Person's Name, Signature and Company Stamp	Date