

Employer Sponsorship Form

This is an agreement between AccountancySchool.ie and the employer, whereby the employer accepts full responsibility of the payment of fees for the student registered on Accountancy School Courses.

Student Details

Student Name:			
Student Address:			
Student E-mail :			
Student Phone No.:			
Order No.:		Sponsorship Amount:	
Subject:			
Exam Sitting:			

Employer Details / Invoice Details

Company Name:			
Contact Name:			
Email Address:			
Invoice Address:			
		Phone No.:	
PO No. (if required)			

This form is not a Credit application form and must be approved by our finance department.



Declaration:

- I. I the employer, or on behalf of the employer, hereby declare that the company will be responsible to pay the amount mentioned in this sponsorship form. No refunds will be issued once the course has started, full course fees are due whether the student completes the course or not.

- II. I accept that, if the sponsored student withdraws from a course or leaves the sponsor's employment the company will still be liable for the outstanding fees.

- III. I confirm that I hold the position stated below and in this capacity, I have authority to bind the sponsor by signing this form.

Position within the Organization:	
Print Name here:	
Authorized signature:	
Company Stamp:	
	Date:

Students Signature:	
Date:	