Student Credit Control Finance Department PO Box 217 Whiteknights Campus University of Reading RG6 6AH

studentcreditcontrol@reading.ac.uk

Date		Applicant	/studer	nt name		
Module or programme of study						
Cost of programme or module						
we bill b	mount to be sponso y module (not year). Sta ch this proof of funding c	ate here				
Organi	sation name					
Contac	t name for invoicing					
Email address for invoicing						
Full address for invoicing						
Teleph	icing querie	es				
Purcha	equivalent					
I confirm that my organisation is willing to accept liability for the tuition fees as stated above and I understand that any default in payment may result in the student's result being delayed and/or liability for fees being transferred to the student.						
Signature:				Name	:	
Email address				Position within the organisation:		

Please ensure that this letter is either:

- printed on headed paper with the company name clearly stated (and where required includes the organisation's official stamp) **or**
- signed using a verified electronic signature (e.g. Adobe) or attached to an email from a professional email address within the organisation

Where this letter is being submitted electronically, either scans or electronically signed forms can be submitted to one of the following:

- New applicants: sponsor forms should be uploaded to the application portal (or emailed to <u>PACE@reading.ac.uk</u>)
- Existing students: PACEstudents@reading.ac.uk