

Funding Agency Sponsorship Agreement

TUDENT INFORMATION			Student Number			
Last Name	First Name		Middle Name or Initial			
Mailing Address						
City	Province		Postal Code)	
Telephone Home	Work		Cell			
Release of Information						
The funding agency named below has my permission	to access my student red	cords, re	egistration and any persona	l inform	ation necessary for,	
or pertaining to, my application and enrolment at North	h Island College.					
Permission is in effect from		to				
				AY	YEAR	
Student Signature Date (mmm-dd-yyyy)						
COLLEGE INFORMATION (may be accessed on the	website www.nic.bc.ca	r contac	et an NIC advisor)			
	Term		Estimated Fees			
Intended Program and/or Courses	and/or Start/End Date		(includes tuition, lab, and student union fees)		Estimated Books	
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AGENCY INFORMATION						
Agency Name						
Mailing Address						
City		Prov.	Postal Code			
Contact Name		Title _				
Telephone Fax	·		Email			
We hereby undertake to sponsor the above named student in the above described program/course(s) for:						
☐ Fees as estimated above or other amount \$ _			Application Fee		\$ 25.00	
Books as estimated above or other amount \$			Assessment Fee		\$ 20.00	
Learner Resource Fee (\$5 per credit or equivalent for post-sec level courses only)			* Health & Dental Insurance	e Fee	\$285.00	
*See http://nisu.ca/ for more information about mandatory Health & Dental fees and students can opt out if eligible. Additional instructions						
Name & Title (print)						
Signature	nature Date					

FREEDOM OF INFORMATION/ PROTECTION OF PRIVACY

I understand that this information, along with subsequent information, is collected under the authority of the College and Institute Act. This information will be protected and used in compliance with the BC Freedom of Information and Protection of Privacy Act.

CAMPBELL RIVER CAMPUS 1685 South Dogwood Street Campbell River, BC V9W 8C1 T (250) 923-9700/1-800-715-0914 E: forms@nic.bc.ca COMOX VALLEY CAMPUS 2300 Ryan Road Courtenay, BC V9N 8N6 T (250) 334-5000/1-800-715-0914 E: forms@nic.bc.ca PORT ALBERNI CAMPUS 3699 Roger Street Port Alberni, BC V9Y 8E3 T (250) 724-8711 /1-800-715-0914 E: forms@nic.bc.ca MIXALAKWILA 140 - 8950 Granville Street, Box 901 Port Hardy, BC VON 2P0 T (250) 949-7912/1-800-715-0914 E: forms@nic.bc.ca