

Sponsorship Agreement Form & Substitute W-9

Completion of this form ensures that your company will be registered with the College.

Sponsor Information					
Company/ Agency Name:					
Select from the drop-down for federal tax classification:					
Enter the tax classification (C = corpora	tion $S = S$ Corporation	P = Partnership) ►			
Street Address:					
City, State, Zip Code:					
Tax Payer Identification	OR Eurolause	1			
Social Security Number	OR Employer i	dentification number	-		
Company/ Agency Contact Person					
Name	Email	Title/ Position	Phone Number		
Check Remit Address (Payment of Invoices):					

Sponsor Billing Profile						
1. Our agency has a formal voucher or tuition assistance form.		NO				
2. Our agency agrees only to pay for approved listed course/s		NO				
(If NO, then agency agrees to pay for all courses selected by student)						
Approved Courses:						
Our agency will cover the following fees:						
Tuition	YES	NO				
Lab Fees	YES	NO				
Application, Record, and ID Fee	YES	NO				
Technology and Facilities Fee	YES	NO				
On-Line Course Fee	YES	NO				
Parking	YES	NO				
Books	YES	NO				
Supplies	YES	NO				

Terms and Conditions

Invoicing and Payment

- Your agency will be provided an invoice after all the periods for non-attendance drops are complete, which is approximately after 60% of the semester is complete, payment is due within 30 days of date of the invoice.
- The authorizing signature on this Sponsorship Agreement Form must differ from the sponsor student.
- All College registration and refund policies apply to this contract.
- Sponsor is responsible for paying the current tuition rate applicable to the student's residency status (Ohio resident, non-resident, international), fees, and books as authorized by the sponsorship agreement, regardless of the student's status of employment at the time of invoicing.
- Sponsor is responsible for any charges for courses started but not completed (i.e. courses withdrawn from during the semester after the refund period).
- Sponsor payment is not grade dependent.
- Sponsor forms should be submitted 10 days prior to the fee payment deadline listed on the Academic Calendar.
- Sponsoring agency will communicate with employees which classes and educational expenses are covered by this sponsorship. Students who fail to pay the fees not covered by sponsoring agency will be restricted from using Third Party funding and will be subject to the College's collection process

Student Privacy

• No student account, financial aid, or academic information will be released without a FERPA Consent Form, signed by the student, authorizing the College to release such information to the Company/Agency.

Responsibilities of the College – Under the terms of this agreement:

- The College will provide students enrolled in the College full privileges afforded to all CSCC credit students in accordance with the normal policies of the College.
- The College will inform students who enroll in the College of the Policies and Procedures of the College through an on-line link. Students will be subject to the Policies and Procedures, including disciplinary and academic rules, of the College.

Book Policy

If your agency authorizes sponsorship of books per the Sponsorship Agreement above please complete the below information.

1. Required course text book	YES	NO
2. Optional and recommended course text book	YES	NO
3. Required supportive supplies (example: personal protective gear – lab goggles, calculators and/or computer programs required for program of study)	YES	NO

The Columbus State accounting office will provide names of employees participating in this program to the CSCC Bookstore. At the point of "check-out" students will simply need to self-identify at the textbooks counter with their name, Cougar identification number, and a photo Identification.

The CSCC Discovery Exchange Bookstore posted return policies and procedure will govern should a student have need to return purchased materials. Any refund amount owed shall be returned to the Employer or deducted from the invoice.

The Company/Agency hereby agrees to the terms and conditions as stated above.

Company/Agency Authorizing Name	Company/Agency Authorizing Signature
Title	Date

^{**} Please return this form to Columbus State Community College Attn: Vern Lewis by fax to 614-287-5985 or by e-mail to vlewis6@cscc.edu.