Student Financial Services, Registrar's Office
Cambrian College of Applied Arts and Technology
1400 Barry Downe Road • Sudbury, Ontario, Canada • P3A 3V8
705-566-8101 • Toll-free (ON) 1-800-461-7145

Sponsorship Form

Please note: all fields are required.

Student Information	
Full name:	Student ID:
Email:	Date of birth:
Program name:	Program code (if known):

Sponsorship Details		
Academic year:		
This sponsorship covers the following term(s) within the above academic year:		
☐ **Fall** (September - December)	☐ **Winter** (January - April)	☐ **Spring** (May - August)
☐ As charged on account. **OR** ☐ To a maximum of $.	☐ As charged on account. **OR** ☐ To a maximum of $.	☐ As charged on account. **OR** ☐ To a maximum of $.
Will this sponsorship cover student health insurance?		☐ Yes **OR** ☐ No
Please note: *If student health insurance is not covered by this sponsorship, it is the responsibility of the student to opt out of the program within their eligible time period. To do so, proof of alternate coverage is required. More information is available in their student portal.*		
Additional sponsored items coordinated through this form: *We will forward this form to the corresponding team.*		Textbooks: $ Parking pass: $ Meal plan: $ Residence: $
Other sponsored items that are not coordinated through this form and simply collected for reporting purposes:		Supplies: $ Other: $ Item: Other: $ Item:

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Funding Type

☐	Indigenous Skills and Employment Training Program (ISET)
☐	Métis Nation of Ontario (MNO)
☐	Post-Secondary Student Support Program (PSSSP)
☐	Other (please specify):

Funding types and amounts are collected for Ministry reporting and auditing purposes; some funding sources are reportable while others are exempt. Clear categorization ensures funds are applied to correct accounts and helps prevent invoicing errors.

Sponsor Information & Authorization

Name of sponsoring organization:		
Mailing address:		City:
Province:	Postal code:	Phone number:
Billing contact name:		
Billing email:		
Authorized signatory name:		
Authorized signatory title:		
☐ I understand if the student withdraws <u>after</u> Day 10 of the term, the sponsoring organization is still liable for the full semester fees as invoiced, unless a cancellation letter is provided. The sponsor is responsible for notifying the student of the cancellation.		
☐ I understand if academic standing information is required for continued sponsorship, the sponsor will request this information from the student. Unofficial transcripts are available in the student portal.		
Signature:		Date:

Return this completed form to sponsorships@cambriancollege.ca. Invoicing will take place within the first month of every term. Submissions received after this will be invoiced individually.

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT: Cambrian College is compliant with the Freedom of Information and Protection of Privacy Act (FIPPA), 1990, and endeavors to treat your personal information in accordance with this law. The personal information requested on this form is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002 and in accordance with Sections 38(2) and 41(1) of FIPPA. The information provided will not be used for any purposes other than the statistical and the outcome may be used for other purposes.
For further information about the information requested on this form or the purpose for which it will be used or more information about FIPPA, please contact the Office of the Registrar at Registrar@cambriancollege.ca or 705.566.8101.