

Employer Sponsor Form

The student named below has informed us that as their employer you have agreed to undertake responsibility for payment of their college fees.

Please copy and complete the statement attached (also downloadable from the college website) on Company Headed Paper then arrange for it to be signed by a person with the relevant authority to commit funds and return to the Finance Department at North Kent Colleges Group - either by post or email to salesledger@northkent.ac.uk.

Please note that if your company requires a purchase order number to be quoted, this must be attached to this statement.

Students Name: _____

Course: _____

Amount due in respect of fees: _____

Tuition Fees: _____

Material Fees: _____

Registration fees: _____

Exam fees: _____

Total Due: _____

Conditions of use

If you receive funding from any other source in respect of this student please do not complete this form but inform the Group of this fact as different fee charges and procedures may apply. North Kent Colleges Group – Payment terms and conditions:

1. Payment terms: 30 Days from date of invoice.
2. Purchase Order Numbers must be quoted on confirmation letter.
3. If for any reason, the student leaves the employment of the sponsoring company or withdraws from the course for whatever reason, the company are still liable for the whole amount of said fees.
4. Failure to pay will result in the employee becoming liable for the fee, and if it remains unpaid the student will be withdrawn and handed to our debt collectors.
5. Payment can be made by either:
 - Cheque – payable to North Kent College
 - Credit Card
 - BACS payment (Sort code: 30-92-53 Account code: 01019286)

Payment for Fees

We _____ (name of company)

certify that we will be responsible for the payment of: (select appropriate)

Tuition ☐ Materials ☐ Registration ☐ Exam Fees ☐

in the sum of £ _____

In respect of:

Student Name: _____

Course: _____

At North Kent Colleges Group during the 2026/27 Academic Session

Invoice Address (if different from headed paper)

Purchase Order No: (if required) _____

Telephone No: _____

I/We have read and agree to North Kent Colleges Group payment terms and conditions

For and on behalf of: _____

Signed: _____

Please Print Name: _____

Position Held in Company: _____

Date: _____

For office use only

Date received: _____ Invoice NO: _____

Date invoice processed: _____ Finance Initials: _____