



Student Sponsorship Form

Section 1: Student Information

- Full Name: _____
 - Student ID Number: _____
 - Date of Birth (YYYY-MM-DD): _____
 - Program of Study: _____
 - Year of Study: _____
 - Nipissing Email Address: _____
 - Phone Number: _____
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Section 2: Sponsor Information

- Sponsoring Organization/Individual Name: _____
 - Contact Person (if organization): _____
 - Mailing Address: _____
 - Phone Number: _____
 - Email Address: _____
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Section 3: Sponsorship Coverage Details

3.1 Sponsorship Type

- ☐ Full Sponsorship
 - ☐ Partial Sponsorship
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3.2 Financial Coverage by Term

Please specify the term(s) to be covered by indicating \$ or % coverage

Academic Term	Tuition Amount (\$/%)	Fees Amount (\$/%)	Total Coverage (\$/%)
Fall			
Winter			
Spring/Summer			

- Total Maximum Sponsorship Amount Authorized: \$ _____

3.3 Expense Coverage (check all that apply)

- ☐ Tuition
- ☐ Ancillary Fees
- ☐ Residence Fees
- ☐ Books / Supplies
- ☐ Other (please specify): _____

3.4 Specific Coverage Details

- Student Health Insurance Covered:
☐ Yes ☐ No
- Program-Specific Fees/Supplies Covered:
☐ Yes ☐ No
If yes, specify: _____
- Additional Instructions:

Section 4: Payment Priority & Funding Coordination

- Is this PSSSP Funding?
☐ Yes ☐ No
- Should this sponsorship be applied as the First Payer on the student account?
☐ Yes (apply before other funding such as OSAP)
☐ No



Section 5: Billing & Payment Information

Nipissing University invoice the sponsoring agency directly:

- Purchase Order or Reference Number (if applicable): _____
 - Billing Contact (if different from sponsor contact):
Name: _____
Email: _____
Phone: _____
 - Billing Address (if different): _____
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Section 6: Terms & Conditions

- The sponsor agrees to pay the specified amounts directly to Nipissing University.
 - The student is responsible for any fees not covered by this sponsorship.
 - Sponsorship applies only to the specified terms and amounts listed above.
 - Any changes, extensions, or cancellations must be submitted in writing.
 - Sponsorship does not automatically renew.
 - Outstanding sponsor account balances may result in administrative holds.
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Section 7: Privacy Statement

Nipissing University respects the privacy of its students, faculty, staff, alumni and donors and will make every effort to protect the personal information that is collected, used or held by the University.

To ensure that all personal information is dealt with appropriately, Nipissing University will comply with its responsibilities under Ontario's Freedom of Information and Protection of Privacy Act ([FIPPA](#)). In addition to ensuring the protection of personal information, FIPPA also gives individuals the right to request access to University-held information. This information includes general records and records containing an individual's own information.

The Office of the Vice-President, Finance & Administration, as delegated by the President and Vice-Chancellor, has primary responsibility for administering FIPPA. The Access & Privacy Officer can be reached in Room F313, via telephone at (705) 474-3450 ext. 4307, or via email at fippa@nipissingu.ca.



Section 8: Authorization

Sponsor Authorization

I confirm that the information provided is accurate and agree to the terms of this sponsorship.

- Name: _____
 - Title (if applicable): _____
 - Signature: _____
 - Date: _____
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Student Authorization (Optional – not required to establish sponsorship)

I authorize Nipissing University to share my financial account details with the sponsor listed above for sponsorship administration.

- Name: _____
 - Signature: _____
 - Date: _____
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Section 9: Submission Instructions

Submit completed form to:

Nipissing University Student Financial Services: finance@nipissingu.ca