

# SAMPLE

{Company Letterhead}

Date

Delta College  
Skilled Trades, M121  
1961 Delta Road  
University Center MI 48710

## RE: COMPANY PAY-Registration Authorization Form

{Company Name} will sponsor the individuals that are listed on this sponsorship letter and are participating in the Skilled Trades Apprenticeship Program. {Company Name} is authorizing Delta College to bill {Company Name} directly for the expenses indicated below.

{Company Name} gives Delta College the authority to register all the individuals who are listed below for these specified classes for the selected Semester:  Winter  Spring  Fall, Year: \_\_\_\_\_.

This authorization only applies to the classes that are listed below for the identified semester.

Name	Student ID	Class	Company will pay for the following:		
			Tuition	Fees*	Books
Example: John James	1234567	SKDR-101-FA510	X	X	X

**Fees\*:** Registration Fees are non-refundable unless the class is cancelled by Delta College.

{Company Name} will be paying the costs for the students as indicated above. Please submit billing information for processing to:

{Company Name}  
{Attention}  
{Company Billing Address}  
{Contact phone number, fax, E-mail}

\_\_\_\_ {Company Name} gives Delta College the authority to register the individual(s) listed above for classes.

Sincerely,  
{Signature of Company Representative Authorizing Payment}  
{Phone}  
{Fax}  
{E-mail}