EXTERNAL AGENCY STUDENT INFORMATION FORM

PLEASE NOTE: It is the student's responsibility to ensure that an authorized copy of this form is submitted to their sponsor 6 weeks prior to the start of classes so that fees can be arranged in time to meet the appropriate payment dates.

Student Name: _____ **McMaster I.D. #:** _____

Name of External Agency: _____ **S.I.N. #:** _____

TO THE SPONSOR: This form has been designed to provide you with information relating to the student's academic registration and university fees. It is the responsibility of the student to inform you of any changes to their registration status.

PAYMENT INFORMATION

Programme of Study & Degree (e.g. Political Science – B.A.)	Start (M/Y)	End (M/Y)	# of Units

Tuition (Includes Supplementary Fees)	**Meal Plan**	**Residence**	**U.H.I.P**		**Total**
$	$	$	$	=	$

Please indicate if the tuition amount is for additional units (added after initial registration period).
(Please circle) YES NO

To be completed by the student:
I certify that all the information on this document is correct as of the date I signed this document. I authorize McMaster University to confirm any of the above information with my external sponsor. I agree that I will immediately notify this External Agency of any changes to my registration status, including my course load.

Student's Signature _____ Date _____

To be completed by university official:
I verify that the information on this form is in agreement with the documentation in our files, or with the information supplied by the student, as of the date I signed this form.

Signature – Authorized Official _____ Department _____ Date _____

Payments & inquiries can be directed to:
McMaster University, Student Accounts and Cashiers
1280 Main St. W., Gilmour Hall Room 209, Hamilton, ON L8S 4L8
Phone (905) 525-9140 Ext. 24478 E-mail: student.accounts@mcmaster.ca