

## THIRD-PARTY SPONSORSHIP FORM - BOOKS AND SUPPLIES

The University of Alberta Bookstore requires that the information on this form be completed by the Sponsor Organization **for each student**. Should any changes apply throughout the year, the Bookstore will require an updated version of this form. The University Bookstore is not responsible for determining what books or supplies are required for course-use. If any discrepancy occurs it must be dealt with by the Sponsor and Student.

The sponsorship amount indicated below is only valid for the purchase of Books and/or Supplies from the Campus Bookstore, and therefore can not be applied to Tuition, Residence, Health Coverage, or any other student costs.

Please note that an administration fee of \$25+tax will be added to each student's invoice per term.

| First Name:                              |                           | Last Name:                    |                      | Student ID:             | quired             |
|--|---------------------------|-------------------------------|----------------------|-------------------------|--------------------|
| GRANTSPECIFICATIONS                      |                           |                               |                      |                         | quinca             |
| Sponsorship Amount: \$                   |                           |                               | Per TERM             | or Per YEAR             |                    |
| Can be applied to: (choose <b>one</b> ): |                           | oks ONLY                      | Supplies ONLY        | Books <b>AND</b>        | <b>ND</b> Supplies |
| Sponsorship Begins: (Mont                | h/Year)                   |                               | Sponsorship Er       | nds: (Month/Year)       |                    |
| Covered Terms:                           |                           |                               |                      |                         |                    |
| Fall<br>(September-December)             | (                         | Winter<br>January-April)      | Spring<br>(May-June) | Summer<br>(July-August) |                    |
| Covered Items/Expenses:                  | Lab Kits                  | Lab Coat                      | /Goggles             | Calculator              | Memory Stick       |
|  | Dictionary                | Blood Pre                     | essure Cuff          | Stethoscope             | Backpack           |
|  | Shipping fees             | 6                             |                      |                         |                    |
|  | (\$12 flat rate to delive | r to the student's home addre | ess if requested)    |                         |                    |
| BILLING INFORMATION                      |                           |                               |                      |                         |                    |
| Organization Name:                       |                           |                               |                      |                         |                    |
| Billing Address:                         |                           | City:                         |                      | Postal Cod              | de                 |
| Phone:                                   |                           | Fax:                          |                      | Email:                  |                    |
| Name of Contact: Co                      |                           |                               | Contact's Position:  |                         |                    |

<sup>\*</sup>Please be aware that an administration fee of \$25 + tax will be added to each student's invoice per term.