

I/We agree to pay Charles Darwin University the enrolment fees associated with the following student:

STUDENT AND COURSE DETAILS			
Student No.	Student Name	Course Code	Course Name
*By signing the form: I acknowledge that if the Student Services and Amenities Fees (SSAF) are not to be sponsored that I will make payment for those fees by the relevant teaching period (either Semester and/or INT[Intensives]) census date. I authorise the disclosure of all information relating to my course and participation to my third-party sponsor.		* Student Signature:	

SPONSORSHIP OPTION

OPTION A - Third Party Sponsorship – All of 2026

Note to Sponsor: by selecting Option A, the organisation authorises Charles Darwin University to invoice and charge all applicable tuition and associated fees to the organisation for 2026, as they become due.

Third Party Sponsorship to cover 2026 - Complete the table below by placing [X] in the appropriate fee type box/es

FEE TYPE									
HECS-HELP <input type="checkbox"/>	Full-Fee Tuition (Postgraduate) <input type="checkbox"/>			Student Services and Amenities Fee (SSAF) <input type="checkbox"/>					

OR (only select option A or B)

OPTION B - Third Party Sponsorship – Complete the table below by placing [X] in the appropriate Teaching Period/s box (either Semester and/or INT (Intensives)).

Fee Type	Semester 1	Semester 2	Summer Semester	INT-1	INT-2	INT-3	INT-4	INT-5	INT-6
HECS-HELP	<input type="checkbox"/>								
Tuition (Postgraduate)	<input type="checkbox"/>								
Student Services and Amenities Fees (SSAF)	<input type="checkbox"/>								

Note: This form is for 2026 ONLY. A new Third Party Sponsorship form must be completed for each year of study.

SPONSOR DETAILS

Employer/Company full name		
Postal Address		
Phone	<input type="text"/>	Email <input type="text"/>
Company order number - if applicable. If not required, enter NA (Not Applicable)		

SPONSOR ACKNOWLEDGEMENT & AUTHORISATION

- By completing and submitting this form, I/we agree to take full responsibility for all tuition fees for the nominated student's course, for 2026 or the teaching period(s) indicated.
- I/we understand that this sponsorship will remain in effect until formally cancelled. Cancellations must be provided in writing to CDU and submitted to the contact specified below.
- I/we understand that invoices will be issued directly to the sponsor and agree to ensure all sponsor contact and billing details are correct and up-to-date
- I/we also acknowledge that if the student has a pre-existing debt with CDU, grades will not be available until the pre-existing debt is paid in full.
- Higher Education fees are subject to the Higher Education Act 2003 legislation and must be paid by the relevant census date.

Authorising officer name	<input type="text"/>	Position	<input type="text"/>
Authorising officer signature	<input type="text"/>		
Date	<input type="text"/>		

For further information on how third-party debt is managed, please refer to the [Student Debtors Procedure](#).

Please return the completed form to Student Finance, Charles Darwin University, DARWIN, NT 0909

Email: fees@cdu.edu.au