

**SPONSORING AUTHORIZATION SPECIFIC**  
**Lane Community College**

Student Name \_\_\_\_\_ New Request \_\_\_\_\_

L# \_\_\_\_\_ Ref or File # \_\_\_\_\_ Modification \_\_\_\_\_

Sponsoring Agency Name \_\_\_\_\_

Billing Address \_\_\_\_\_

City, State & Zip \_\_\_\_\_

Contact & Ph: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail \_\_\_\_\_ E-Mail Excel spreadsheet bills: Yes \_\_\_\_\_ No \_\_\_\_\_

The above named person is authorized to enroll/register at Lane Community College for the following dates: \_\_\_\_\_ through \_\_\_\_\_ (term or school year) with the understanding that the sponsoring agency has authorized and agreed to pay the following amounts: Example tuition 100%, or percentage up to \$ 500.00, or \$ amount.

\*Tuition %, or % up to *maximum* \$, or \$ amount \$ \_\_\_\_\_

\*Fees %, or % up to *maximum* \$, or \$ amount \$ \_\_\_\_\_

\*Books %, or % up to *maximum* \$, or \$ amount \$ \_\_\_\_\_

\*Supplies %, or % up to *maximum* \$, or \$ amount \$ \_\_\_\_\_

\* \_\_\_\_\_ %, or % up to *maximum* \$, or \$ amount \$ \_\_\_\_\_  
Specify Item

\* \_\_\_\_\_ %, or % up to *maximum* \$, or \$ amount \$ \_\_\_\_\_  
Specify Item

\* \_\_\_\_\_ %, or % up to *maximum* \$, or \$ amount \$ \_\_\_\_\_  
Specify Item

\* Mandatory Sponsor Agency Fee is 10.00 or 20.00 \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Signature of Authorized Sponsor Agent \_\_\_\_\_

Date: \_\_\_\_\_

Fax: 541-463-3287