Semester:	

## **Departmental Sponsor Agreement**

1. Parties:	dov.o	f h.	
This agreement is entered into this and between	Day	f by Month, Year	Student's Name  of Texas Tech University.
			or rexas recironiversity.
	Name of S <sub>F</sub>	oonsoring Department	
to the entire duration of sponsorshi completed <u>each term</u> while the s	lationship between ip. This form is on tudent attends To	ly to be used in the event a sexas Tech University. All no	student, and the sponsoring department stated above with regard cholarship cannot be applied. This contract needs to be ormal billing deadlines and penalties apply to the student's account right to terminate this contract upon written notice to both the
3. Consideration: The DEPARTMENTAL SPONSOR () Total tuition and mandatory for			heck one): and scholarships () Other amount of \$
form. TTU will then process an inte	rnal document to class day during fa	charge the departmental spor Il or spring semesters and the	lue on the student's account upon acceptance of this completed asor for the amount specified. These internal charges will be e fourth (4 <sup>th</sup> ) class day during summer terms. The student agrees to
5. Amendments to the Contract: When awarded, the agreement sha which consent shall be evidenced to	all not be changed		ed in any respect without the mutual consent of the parties hereto, uted by all parties.
6. Assignment: This contract may not be assigned	or transferred in w	whole or in part by either party	without the prior written consent of the all parties.
7. Disclaimer: This contract is not complete and v department and the student, and the			t the signatures of both the fund manager in the sponsoring abination being stated below.
			'22', '23'), including cost sharing ("M") or program income ('28P') of Business Services can process the request.
Please explain why the Scholarshi	p system cannot b	ne used for this payment:	
Department Fund Manager Appr	oval		
Name:		Title:	
Signature:		Date: _	
FOP***:			
Note: Charges for Whitacre Colleg WCOE Benefit.	e of Engineering o	doctoral student waivers that	comply with OP 62.40 will post to account 7P2002 Supplemental
Student			
Name:		R#:	
Signature:		Date:	
Office of Research Accounting	<b>Approval</b> (If Requ	ired)	
Name:		Title:	
Signature:			
Texas Tech University Student B	Susiness Services	s Approval	
Name:		Title:	
Signature:		Date: _	