

THE UNIVERSITY OF THE WEST INDIES

GLOBAL CAMPUS

STUDENT DECLARATION

To:	Campus Registrar, Th	ne UWI Global Campus
т		
that my s programm	ponsor (including Govern	hereby declare and agree that in the event ament) fails to pay the tuition fees for the egister with The UWI Global Campus, I will become liable programmes/courses.
		_
Name		
Date		
Witness		-
 Date		_