



Business Office
 629 Industrial Park Ave
 Asheboro, NC 27205
 336-633-0292

Business Sponsorship Form

North Carolina law provides a special benefit to employers choosing to pay to the college the full cost of an eligible employee’s community college tuition. Even when the student/employee does not meet the requirements for in-state tuition, the employer pays the tuition at the in-state rate. The law requires the student/employee to work at the employer’s North Carolina business location. The burden is on the employee/student to establish that the business is a North Carolina business.

PART I: To Be Completed by the Student/Employee

RCC Student ID #: _____ Date of Birth: _____

Student’s Full Name: _____

Phone #: _____

Sponsorship Year and Term: _____ (examples: 2023 Fall, 2024 Spring, 2024 Summer)

To be considered for the business sponsor exception, **EACH SEMESTER**, no later than the end of late registration, the student/employee must submit their Business Sponsorship Form along with payment from their **North Carolina employer**.

This form should be sent to the attention of Tavia Housley, Accounts Receivable Specialist/or turned in at the Business Office at the Asheboro Campus. Payment may be made in the form of a business check or credit card. For dates, please refer to the online academic calendar on RCC’s website at www.randolph.edu. For assistance, please visit the Business Office or call 336-633-0292.

I understand the above procedures and confirm that I am an employee of the business indicated in **Part II** of this form, who agrees to pay my tuition and fees by the published deadline. If the business does not make full payment by the deadline, I understand that I am responsible for all charges at the Out-of-State rate, or will be dropped for non-payment. Further, I understand that this form must be submitted each semester.

Student’s
 Signature: _____

Date: ____/____/____



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Part II: To Be Completed by Employer (Business/Company Sponsoring)

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I have reviewed the above statement regarding business sponsorship, and I am confirming this student/employee is my current employee. Further, I agree to make full payment of tuition and fees for the term indicated by the payment deadline and understand this form must be submitted each semester.

Employer, Full Name: _____

Employer Title: _____

Business/Company Name: _____

Address: _____

Phone #: _____

Sponsorship Year and Term: _____ (examples: 2023 Fall, 2024 Spring, 2024 Summer)

Employer's Signature: _____ **Date:** ____/____/____

Business Sponsorship Payment - The Business Sponsor is responsible for payment of the tuition and fees via check or credit card to Randolph Community College by the published payment deadline. If payment is not received by the deadline, the classes will be removed from the student's schedule (PURGED).
