



COMPANY PAYMENT FORM

Note to Parents: Please ask an authorised representative of your company/employer to complete, sign and stamp this form. Return the completed form to Student Services to guarantee payment for your child(ren).

This letter certifies that _____ (Name of Employee) is employed with _____ (Name of Company). Our company will be responsible for the course and all related school fee payments for the following student(s) at Nexus International School (Singapore) and that all fees will be settled by their due dates in order for the student(s) to attend classes.

The Nexus Withdrawal and Refund Policy is available at our website www.nexus.edu.sg

Learner(s) Name

Full Name: _____ Year Group/Form: _____

Nexus International School (Singapore) is to send all invoices and receipts to the following address:

Company Name (to appear on invoices) _____

Contact Name _____ **Contact Number** _____

Blk/House No _____ **Street Name** _____

Unit No. Building Name _____

Country _____ **Postal Code** _____

Email _____

Signature _____ Date _____

Name _____ Designation _____

Company Stamp _____