

Purchase Order No.			
Employer's name and add	dress		<b>a</b>
Invoices will be sent to the	email address sup	plied below	พ. (Use Block Capitals)
		Tel: _	
Email:			
Student's Name	Course		Total Fee
Total Chudouta Cumpantado		Tatal Face	Develop C
Total Students Supported:		Total Fees	Payable £
Employer Deposit - UCC stude  Please quote the Student ID No  If this payment is not receive to receive UCC tuition.  To pay the balance, please s	umber (or student n	ame & date	
Payment of balan	ice within 30 days	on receipt	of invoice.
platform used by Employer Instaln	the Colchester Ir	nstitute. Ple Ind Conditio	the Recurring Card Payment (RCP) ease ensure you also sign the UCC ons on page 3 of this document. Our plan.
Course and named student(s) the terms and conditions over	), the Employer shal rleaf, the UCC Empl 2023-24 which ca	l be respons oyer Instalm In be foun	I name) agree on behalf of the above providing educational services for the above sible for all fees payable in accordance with ment Plan Terms and Conditions (see page and on Colchester Institute's website a
Signed:		Print Nam	me:
Position in Company:			Date:
Email:			



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#### **TERMS AND CONDITIONS**

- 1. These terms and conditions, together with the UCC Employer Instalment Plan Terms and Conditions and the UCC Fee Policy 2023-24 which can be found on Colchester Institute's website at <a href="https://www.colchester.ac.uk/ucc/higher-education-finance/">https://www.colchester.ac.uk/ucc/higher-education-finance/</a> represent the entire agreement between Colchester Institute, the Employer and the student in relation to the provision of educational services to, and the payment by the Employer of the course fees of the students named overleaf. No variation in the terms and conditions will be effective unless agreed by all parties in writing.
- Fees remain payable by the Employer in connection with courses provided by Colchester Institute to the students named overleaf, irrespective of whether or not any individual student completes the course for whatever reason, and irrespective of whether or not the student remains in the employment of the Employer throughout the duration of each relevant course.
- 3. If any payment is not paid in accordance with this Employer Authorisation Form or the UCC Employer Instalment Plan Terms and Conditions, Colchester Institute will pursue all unpaid debts and may inform debt collection agencies to recover the money owed from the Employer. Additional costs may be incurred which will be payable by the Employer.



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# **UCC Employer Instalment Plan Terms & Conditions**

The Colchester Institute provides a payment platform called RCP (Recurring Card Payment) for Instalment Payment Plans. It uses your debit/credit card details NOT your bank details.

To use the Employer Instalment Payment Plan, you agree to the following Terms & Conditions:

- 1. I confirm payment of 25% of the course fee has been paid in advance.
- 2. I confirm that the details as provided on the Employer Authorisation Form are accurate and agree for these to be used in the set-up of the Employer Instalment Payment Plan account.
- 3. I agree as the Employer I/we will provide valid card details (in line with the Colchester Institute GDPR & PCIDSS policies) for the set-up of the payment plan.
- 4. I agree as the Employer I/we will adhere to the payment schedule of up to 10 monthly instalments.
- 5. I understand that if I/we the Employer do not adhere to the payment schedule then I/we may be referred to a Debt Collection Agency and incur additional charges.
- 6. I agree as the Employer I/we will update the Finance Office at the Colchester Institute with any changes to the Employer's card details.
- 7. I agree as the Employer I/we will be contacted by the College by email, telephone, mobile and SMS regarding the Employer Instalment Plan.
- 8. I understand that as the Employer I/we agree to contact the College's Finance Department with any questions regarding payment of the Employer Instalment Plan:

Telephone: 01206 712728 or 01206 712628

Email: finance.dept@colchester.ac.uk

9. I confirm that I am authorised to sign on behalf of the Employer.

Signed:	Print Name:
Position in Company:	Date:
Email:	



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In compliance with current data protection law Colchester Institute will keep your personal information only if is necessary to fulfil the purpose for which it was collected and in accordance with our records retention schedule. Further details regarding our privacy notice can be found at:

https://www.colchester.ac.uk/policies/website-privacy-policy-and-terms-and-conditions/



