



THE UNIVERSITY OF THE WEST INDIES
OPEN CAMPUS

STUDENT DECLARATION

To: Campus Registrar, UWI, Open Campus

I, ----- hereby declare and agree that in the event that my sponsor (including Government) fails to pay the tuition fees for the programmes/courses for which I register with the UWI, Open Campus, I will become liable for the full cost of tuition for these programmes/courses.

Name

Date

Witness

Date