

International Student Referral Scheme

Current / Previous student details

****Name of student making the referral:**

Student Number:.....

Course studied at LCBF:.....

Course Tutor:.....

Dates of study with LCBF: From: To:

Current telephone contact numbers, including country codes:

Home: Mobile:

Full postal address:.....

.....

I confirm that I have referred (Insert name of new student) to study at LCBF, on the course detailed below. I acknowledge that the discount for the international student referral scheme by LCBF will only be applied once the new student has paid the tuition fee deposit to LCBF and received their visa.

For recommending the student: **A discount of £300.00** will apply for your outstanding course fees or if you have already paid in full we will pay **you £300.00 in cash** on the condition that the referred student has paid the specified fee and has arrived at the college.

Signature of current / previous student: **Date:**

Choice of payment:

Payment by cheque: **Yes** **No** **(please circle)**

****Name of person the cheque should be made payable to:**.....

(must be the same as the name of student making the referral)

Full postal address the cheque should be forwarded to (if different from above):

.....

.....

Payment direct to bank account: **Yes** **No** **(please circle)**

****Full name of account holder:**.....

(Must be the same as the name of student making the referral)

Name of Bank:.....

Full address of Bank:.....

Sorting code:.....

Account

number:.....

IBAN / SWIFT payment number

Reference number (if applicable):.....

New student details (To be completed by student)

Name of student being referred:.....

Course to be studied:.....

Proposed dates of study with LCBF: From: To:

I confirm that(Insert name of current / previous student) has referred me to LCBF, to study on the above-mentioned course.

Signature of new student: **Date:**

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