

Staff Fee application form

To be completed by Applicant or Student:

* fields are compulsory		
Surname *		
Forenames *		
USN *		
Application number (for applicants only)		
College *		
Department studying at *		
Mode of study *	□ Full-time	□ Part-time
Expected length of study *	Start:	End:
Programme of study *	□ PhD □ MPhil by thesis only	M2
Supervisor (if known at the time of application) *		
Employment details: * fields are compulsory		
Department you will be employed by * 1		
Post held with University of Cambridge (description, grade) *		
Dates of employment *	Start:	End:
Percentage of full-time employed *		
Student declaration (please read and tick all) *	 I undertake to inform the Student Registry immediately if my employment with the University of Cambridge ceases before the end of my course; I understand that if this happens I shall at that point have to submit a new financial undertaking form proving that I have sufficient liquid capital to pay the remaining fees until the end of my course; 	
	 I understand that if I am unable to pay the fees for the whole duration of the course, I may be removed from the Register of Graduate Students. 	

¹ where the employing department is different from the admitting department, the agreement of both Heads must be obtained by filling in separate forms



Signature * Date *		t (no more than 300 words) to demonstrate that research for your ly with your paid employment (for full-time course) or contribute *
	Signature *	
Date *		
	Date *	

The Student Registry will use the personal information on this form to assess your eligibility for a reduced staff rate. This is so that we can fulfil our contractual obligations to you as a student. We retain this information for six years following your graduation, after which this form is destroyed and a copy is uploaded to your student record. For more information on how the University processes your personal information, please see https://www.information-compliance.admin.cam.ac.uk/data-protection

To be completed by Head of Department

* fields are compulsory

Statement by the Head of Department (please read and tick all) *	 I confirm that information above is correct; I confirm that the research of the applicant named above will overlap almost entirely with his/her paid employment (full-time degrees) or contribute directly to it (part-time degrees).
Any comments	
Name *	
Signature *	
Date *	

Where to submit:

For applicants	Please upload form via the applicants self-service, under the Staff Fee category
For current students	Please return to Student Registry either scanned by email to student.fees@admin.cam.ac.uk or post to Student Registry, Student Services Centre, New Museums Site, CB2 3PT