



Student Referral Form

Your name: _____

Email ID: _____ Phone: _____

If you refer a candidate and he or she enrolls in the course the consultant referring will get 10% of the basic fees.

I have read and understood **(Is Future Career)** student referral policy. I understand that if the candidate I refer enrolls as a result of my referral, I will receive a referral amount once the enrollment is finalized and invoice for payment is generated from student (Name).

For transfer of funds Kindly share your bank details below: -

Customer Name	
Account Number	
IBAN	

Candidate signature: _____ Date: _____

