



**Application for Tuition Support at Other Colleges & Universities  
For Employees**

Name: \_\_\_\_\_ Banner ID: \_\_\_\_\_

Department: \_\_\_\_\_ Position: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

School Attending: \_\_\_\_\_

- Technical / Vocational Course(s) – related to skills in some area of the University
- Undergraduate Course(s) for Credit

Course Title	Course Number	Credit Hours	Start Date	End Date

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Amount of Pell or Federal Funding Received: \$ \_\_\_\_\_ Total Cost: \$ \_\_\_\_\_

Attach a proposal describing the program being pursued and a copy of the paid bill showing charges.

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To Be Completed by the Office of Human Resources**

Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cost / Credit Hour:	\$	Total Approved:	
Check Requested:		¼ of Semester Tuition:	\$
Approved By:		Date:	
Final Grade:		¼ of Semester Tuition:	\$
Check Requested:			
Approved By:		Date:	