



COURSE APPROVAL APPLICATION

APPROVAL MUST BE OBTAINED TEN (10) DAYS BEFORE BEGINNING THE COURSE

Employee Name: _____ Extension: _____
 Department: _____ Employee Group: _____
 Date of Hire: _____ Full-Time Part-Time

Before completing the items below, please read your employee agreement/handbook.

1. Is reimbursement for a spouse? Yes No
 If yes, name of spouse: _____
2. Are you on a leave of absence with pay? Yes No
3. Are you on a leave of absence without pay? Yes No
4. Are you eligible to receive a scholarship or reimbursement from another source? Yes No
 If yes, what is the dollar amount? \$ _____
5. Is this course required for degree completion? Yes No
6. Does this class meet during your normal work schedule? Yes No
7. How is this course(s) related to your present assignment? _____

CATALOG NUMBER	COURSE TITLE	SEM HRS.	TERM HRS.	BEG/END DATES

Name of college/university: _____

GRCC courses only: Resident Non-Resident Tuition Deferral (ESP only)

Amount of tuition per credit: \$ _____ Fees: \$ _____ Total Tuition: \$ _____

I understand reimbursement/GRCC tuition deferral is based upon a final grade of "C" or better.

Employee Signature Date

Dean/Supervisor Signature Date

Approve Disapprove

HUMAN RESOURCES USE ONLY

Approve Disapprove Fiscal Year: _____

Comments: _____

SUBMIT FORM TO HUMAN RESOURCES