

Southwestern Community College

# Employee Request to Take Class

Date of Request \_\_\_\_\_

Please print

Name of Employee \_\_\_\_\_

Semester Requested \_\_\_\_\_

Course Number and Title \_\_\_\_\_

Credit Hours \_\_\_\_\_

Time and Days of Class \_\_\_\_\_

Class will be during Work Hours

Class will not be during Work Hours

Justification for Taking Class \_\_\_\_\_

I understand and agree that Human Resources is to receive an official transcript of my grades for this class and it is my responsibility to have the transcript sent to Human Resources upon completion of the class.

**Employee Signature** \_\_\_\_\_

## Supervisory Approval

Supervisory approval is required **IF** the class is to be taken during work hours; however, supervisory approval is **NOT** required if the class is during non-work hours.

	Signature	Date	Approved	Denied
Immediate Supervisor				
Vice President				
President				

*Send this completed form to Human Resources*