

Hampden-Sydney College Request for Employee Tuition Aid

(On Campus)

Name:	Social Security Number:
Title:	Employment Date:
Department:	Application Date:
I am requesting approval by Hampden-Sydney Co	llege to attend the following class(es) on campus:
Semester:	Year:
Course Name:	Hour Schedule:
1.)	
This class (does) (does not) have space available.	
Signature of Registrar:	Date:
Im	mediate Supervisor
class(es) at Hampden-Sydney College. The employeach week by beginning work early, work late, or vacation or compensatory time. The time card (if additional hours worked as "make up" time or the	permission to be absent from his/her work station in order to attend byee understands that he/she must "make up" the time lost from work other otherwise working additional hours, or by using available applicable) must reflect the time absent to attend class and the vacation or compensatory time used. With this agreement in mind, I (If permission is not allowed, pleased attach a letter of explanation.)
Supervisor's Signature:	
	Cabinet Officer
I (give) (do not give) my permission for	to attend the above stated class(es).
Cabinet Officer's Signature:	Date:
	Employee
Having received permission from the Registrar, my attending the above listed class (es).	y immediate supervisor, and my immediate cabinet officer, I will be
Employee's Signature:	Date:
	WE WANTED TO THE COURT OF THE C

THIS FORM MUST BE FORWARDED TO THE HUMAN RESOURCES OFFICE 10 DAYS PRIOR TO THE BEGINNING OF THE SEMESTER. THE HUMAN RESOURCES OFFICE WILL FORWARD ONE COPY TO THE OFFICE OF FINANCIAL AID AND THE REGISTRAR'S OFFICE. AN ADDITIONAL COPY WILL BE PLACED IN THE EMPLOYEE'S FILE.