AUSTIN PEAY STATE UNIVERSITY
APPLICATION FOR FEE WAIVER - PC 191

NOTE TO EMPLOYEES: State Legislation regarding PC 191 requires that annual leave or appropriate time off will be charged to attend classes taken during work hours. Registration is allowed on a space available basis.

INSTRUCTIONS: This form should be completed two weeks prior to registration. If approved, the original will be returned to the employee. Employee must meet the requirements for admission and are subject to regulations of the institution offering the course.

TO BE COMPLETED BY THE EMPLOYEE

Employee's Name | Banner ID # | Employment Date | P.O. Box

Department

I request approval to enroll in the following course offered at

Institution | Course No. | Code No. | Section No. | Credits

Course Title | Class Time/AM/PM | Days class meets

Semester/Year | Undergraduate | Graduate | For Credit | Audit

Employee's Signature | Date

TO BE COMPLETED BY THE IMMEDIATE SUPERVISOR AND SENIOR ADMINISTRATOR
Recommend approval. I certify that the above named person who is under my direct supervision is a full-time employee of this institution.

Supervisor's Name | Title | Date

Supervisor's Signature | Senior Administrator's Signature | Date

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TO BE COMPLETED BY THE OFFICE OF HUMAN RESOURCES
Recommend approval. I certify that the above named person is a full-time employee of this institution and that he/she has adequate annual leave hours to attend the above course during work hours (if leave is to be used).

Signature | Date | Functional Area

TO BE COMPLETED BY BUSINESS OFFICE

Cost of Course $_____ Approval _____ Date _____

NOTE TO ACCEPTING INSTITUTION: This employee has been approved to participate in the PC-191 Program on a fee waiver basis only. The above institution will not be liable for any fees due as a result of the above employee's enrollment in the referenced class.

Reset

APSU/FA/PA/005 (REV. 10/01)