

APPENDIX I
Educational Development Request Form

PART A: ☐ Faculty ☐ Management ☐ Professional ☐ Classified

NAME: _____ Position: _____
 Last First Middle
Date of Hire: _____ Office: _____ Campus: _____

PART B: Course(s) requested to be taken

COURSE NO. AND TITLE	TIME OFFERED	SEMESTER	Campus

Explain briefly how the course(s) will benefit you and your job. [Attach a letter if you wish]

EMPLOYEE'S SIGNATURE

DATE

Part C: Signatures of appropriate supervisors *(If denied, write reasons in the comment section below & return form to employee).*

Approved	Denied	Immediate Supervisor's Name:	Signature:	Date
Approved	Denied	Vice President's Name:	Signature:	Date

Comments: