TUITION ASSISTANCE PROGRAM REQUEST

Name			Date				
Position			Department		Ext.		
Date of Full-time Employment	Years of Servi	ice	Supervisor				
Academic institution you plan to a	ttend:						
Study plan is to:							
☐ Take one or more cla	sses	Compl	lete Associate	e Degree	or Specia	al Certification	
Complete a degree							
Major: Explain, identify your career goals	at Colorado Co	ollege.					
Explain, lastinity your ourself goals	- dt - 00.01dd0 - 00	5ogo.					
Supervisor's Comments:							
Staff Signature Supervisor Ap			val		Director of Human Resources		
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