EMPLOYEE CLASS ENROLLMENT APPLICATION

Print Name : _____

I wish to enroll in the following class(es) for (Circle One) CREDIT or AUDIT

SEMESTER Fall / Spring	Course Number	Course Name

I understand that I am responsible for the cost of the book(s) up to a total of \$75.00.

Signed:	Date:
Supervisor Approval:	Date:

Please submit this signed and approved form to the Registrar.

OFFICE USE ONLY:

Approved VPAA:	Date:
Business Office:	Date: