

Mobile County Sheriff's Office

Deputy Sheriff and Corrections Officer Education Foundation

<u>Course Pre-Approved Application</u> (A separate application is required for each course.)

Employee Info	rmation:						
Full Name:			Job Title:				
Address:							
Department:		Work Phone: Work Phone: Work Phone:					
Are you a full-t	ime employee in active pay state	us? Yes	SNo		Hire Date: _		
College/ Schoo	l Information:						
Institution Nam	Accrediting Body:						
			nformatio				
Course #	Course Name	Start Date	End Date	Credit Hrs	Tuition Per Hour \$	Total (Cr.hrs. x Tuition)	
						\$	
						\$	
					Total	\$	
Type of Degree	e Program: Associate	□ Bachelo	or's 🗆	Graduate	•	•	
Education Assi I hereby certify approved class	itional space, use the back and/o Attach offic istance Agreement: the foregoing information is tru during my off-duty hours and the	te and correct	. In submi	and fee sch tting this ap	plication, I represe to commute to clas	sses. I understand that	
understand that my employmen	ible for reimbursement of trave in my attendance of any course t. Should an agency, such as the proper expenditure of public fur	approved for ne Examiners	reimburse of Public	ement I will Accounts,	not be acting with determine that tuit	in the line and scope of	
Employee's Signature:			Date:				
	or Appointing Authority Au			uition Reiml	oursement Policy, I	approve this application	
Department H (For employees	lead Signature:under the appointing authority of	the Mobile C	ounty Com	mission)	Date:		
	al Signature: of other Appointing Authorities)						
This Course Pr	e-Approval Request has been:	Approv	red D	enied I	curre	re does not relate to nt job responsibilities. :	
County Admin	istrator or Representative		Date		_		