

Tuition Remission Credit Voucher - Continuing Education

		Semester _		
Employee Name:		H#	H#	
Departn	nental Account Numbe	er (Required)		
Course Title Course Prefix Amount of Tuition Credit \$ Signature of Employee: Vice President of Con Ed: Immediate Supervisor of Employee: Associate/ Assistant VP (if applicable): Vice President: Human Resources: This is to certify that the above named employee is a fu Georgetown Technical College. Human Resources Departs		CEU's		
	/		/	
		e Prefix	Section #	
Amount of Tuition Cre	dit \$			
Signature of Employee	ə:		Date:	
Vice President of Con	Ed:		Date:	
Immediate Supervisor	of Employee:		Date:	
Associate/ Assistant V	'P (if applicable):		Date:	
Vice President:			Date:	
Human Resources:				
-	-	oyee is a full-time faculty	y/staff member at Horry	
-	Human Resour	ces Department	 Date	
	Taman Roodan	occ Bopainion	Dato	
For Business Office Use	 Only:			
Data Processed				