



Volunteer State Community College
Tennessee Board of Regents
Application for Fee Waiver (PC 191 Form)

I. To Be Completed by the Employee

Employee Name: _____

Employee ID: _____ Employee Account # _____

Institution Employed: _____

Department/Division: _____ Account # _____

I request approval to enroll in a course during the _____ term at _____

(Institution/school). The course in which I wish to enroll is _____

(Title and number), which carries _____ hours of credit and meets from _____ to _____

on _____ (days of week) from _____ to _____ (dates).

This course is for: Credit _____ Audit _____ Graduate _____ Undergraduate _____

I understand the conditions affecting my enrollment in this course.

Signature _____ Date _____

II. Approval Recommendation

Immediate Supervisor: _____ Date _____

Vice-President: _____ Date _____

III. Employment Certification

Date of full-time employment: _____

Signature: _____ Date _____

Human Resources Representative

Note to accepting institutions: This employee has been approved to participate in the PC-191 Program on a fee waiver basis only. The accepting institution/school will not be liable for any fees due as a result of the above employee's enrollment in the referenced class.

Banner Account -110001 310100 62701-

200 ___ Instruction

300 ___ Public Service

350 ___ Academic Support

400 ___ Student Services

450 ___ Institutional Support

500 ___ Physical Plant Revised

Revised

4/2024