

MERCED COLLEGE Office of Human Resources

Permission to Take College Courses During Working Hours

Employee's Name			Employee # A			rea/Dept.	
hereby request which are held d	•			e co		ame of Enrolled	Institution)
Course No.	Units Course 7		Fitle		ass Hour	Day	Semester
My current work	week schedule	e is (indicate sta	arting and en	ding	times):		
Sunday	Monday	Tuesday	Wednesd	ay	Thursday	Friday	Saturday
Revised Work W	eek:						
	Start and End Times		Total Hours		Subtract Lunch	Subtract Classes	Hours Worked
Sunday							
Monday							
Гuesday							
Wednesday							
Γhursday							
Friday							
Saturday							
						Total Hou	rs
The workApproval administr responsibLimited to	se will improve load in a partic of the request rator (e.g., Dear ole administer (o one course permust be submi	the employee's cular area will remust be received, VP). If approve.g., Dean, VP, er term	s service to the second	ne Di ely a mme the r ent/P	strict. Iffected. Idiate supervise If equest may be If esident). Der		ne next level al is final.
Employee					Date		
Immediate Supervisor/Manager					Date		
Area Vice President					Date		
Vice President Human Pescurces					Date		