



PETITION FOR WAIVER OF TUITION AND FEES
(FOR FULL TIME EMPLOYEES ONLY TAKING BLUE RIDGE CTC COURSES)
ACADEMIC AND NONACADEMIC PERSONNEL

Name: _____ Student C#: _____

Address: _____

City, State, Zip Code: _____

How long have you been employed at Blue Ridge CTC? _____

Academic Year: _____ Semester: _____

Signature: _____

PROPOSED COURSES (SIX HOURS MAXIMUM)

CRN #	SUBJECT	CRS. NO.	SECTION	TITLE	CR. HRS.	TIME

*THE CRN MUST BE ENTERED BEFORE YOUR REGISTRATION CAN BE PROCESSED
PERMISSION IS GRANTED FOR THIS EMPLOYEE TO ENROLL IN THE CLASSES LISTED ABOVE.

DATE: _____ APPROVED BY: _____
IMMEDIATE SUPERVISOR

NOTE: If you were not enrolled for classes the previous semester you must submit an Application for Admission (available in the Enrollment Management Office), if you are a degree seeking student. If you are a special non-degree student you must complete the non-degree student Registration Form (available in the Enrollment Management Office). You may be required to list the cost of the class(es) as income on your Federal Income Tax Forms.

**RETURN THIS FORM TO THE FINANCIAL AID OFFICE BY THE DEADLINE DATE ESTABLISHED
PREVIOUSLY**