

# Educational Release Time Request Form

NC-2001, Educational Release Time Rule

Employee Name  Department  Semester

Pursuing degree Type  Major  Credits needed

Job Related How:

CRN  Course Title  Credit Hrs

Class time   Mon  Tues  Wed  Thurs  Fri  Sat

Periodic attendance required Explain

Start Date  End Date  # of Weeks

Institution Offering Class  **Must be a regionally accredited institution.**

Educational Release Time  hours/week **Not to exceed 3 credit hours in 1 semester**

Travel time requested  hours/week

Employee Comments:

Employee Signature  Date

### Supervisor Review:

Comments:

Approved  Denied Signature  Date

### Department Administrator Review:

Comments:

Approved  Denied Signature  Date

### Human Resource Director Review for eligibility:

Comments:

Approved  Denied Signature  Date