

I, _____ Student ID M- _____,

Full Name (print)

am enrolling at Montgomery College for the _____ semester, 20 _____,

Fall/Winter/Spring/Summer

under my employer's, _____

Name of Company/Host Family

In-County Rate/Tuition agreement: This agreement allows me to enroll at the In-County tuition rate as long as the following conditions are maintained: I am enrolling in courses which benefit my employer; my employer is paying for all tuition and fees; and I am presenting written authorization from my employer approving the following courses:

_____	_____
Course Reference Number	Course Title
_____	_____
Course Reference Number	Course Title
_____	_____
Course Reference Number	Course Title
_____	_____
Course Reference Number	Course Title
_____	_____
Course Reference Number	Course Title

Check one:

- Employee will pay tuition and fees at the time of registration and will be reimbursed by employer.
- Employer check, purchase order or authorization to bill is attached.

I understand that if my employer does not pay this bill, the College will bill me.

Company/Host Family Signature _____ Date _____

Student Signature _____ Date _____

Company/Host Family Name _____

Company/Host Family Address _____

Contact Person (Print) _____

Telephone Number _____