

McMurry University  
**Notification of Enrollment**  
Attending Class/Course during Regular Work Schedule

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*Instructions:*

*Complete the following information for classes/courses you plan to enroll in that meet during your regular work schedule. Your immediate supervisor must approve your request by signing the form below. Return the completed form to the Human Resources office prior to your first day of class.*

*Complete a new form each semester you plan to attend a class/course.*

*Indicate the time you are in the class/course on your Bi-Weekly or Monthly Administrative Reporting Form as "O/PD". In the comment section indicate that you are attending an approved class/course.*

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Employee Name: \_\_\_\_\_

Department: \_\_\_\_\_

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Class/Course Enrolled In: \_\_\_\_\_

Semester/Year Attending: Fall/\_\_\_\_ Spring/\_\_\_\_ May Term \_\_\_\_ Summer I/\_\_\_\_ Summer  
II/\_\_\_\_

Day of Week Class/Course Held:

Monday\_\_\_\_ Tuesday\_\_\_\_ Wednesday\_\_\_\_ Thursday\_\_\_\_ Friday\_\_\_\_

Time of Day Class Meets: \_\_\_\_\_

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Class/Course Enrolled In: \_\_\_\_\_

Semester/Year Attending: Fall/\_\_\_\_ Spring/\_\_\_\_ May Term \_\_\_\_ Summer I/\_\_\_\_ Summer  
II/\_\_\_\_

Day of Week Class/Course Held:

Monday\_\_\_\_ Tuesday\_\_\_\_ Wednesday\_\_\_\_ Thursday\_\_\_\_ Friday\_\_\_\_

Time of Day Class Meets: \_\_\_\_\_

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Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Form should be submitted to Human Resources Office immediately upon completion.*