

2411 Pathways Crossing
Belleville, IL 62221



Phone (618) 355-4700
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APPLICATION FOR COURSE APPROVAL – LOCAL 6600 EDUCATION INCENTIVE

Employee Name:	Position:
Course Start Date (Mo./Yr.):	Course End Date (Mo./Yr.):
University/College:	
Course Name:	
Course Number:	Credit Hours:
Which certified position at BASSC is this course related to?:	
Is a tuition waiver or financial aid being used for this course? (Yes or No):	
Employee Signature:	Date:

*This application should be submitted to the Executive Director of BASSC prior to beginning the course

****BASSC DISTRICT OFFICE USE ONLY****

Course Approved: _____	Course Not Approved: _____
Executive Director Signature:	Date: