Luzerne County Community College Student Tuition Sponsorship Agreement

Please note: This is not a registration form.

Student/Employee Information				
Last Name	First Name			
Date of Birth	Email	Email		
Phone Number	Current Semester/Year	t Semester/Year		
Requested Course of Study (e.g., Associa	ate of Science in Business)			
Employer Information				
Employer Name				
Employer Address				
Human Resources Contact	City	State	Zip	
Name Telephone	e Number Ema	il		
the end of the add/drop period for request registration, I must have counselor/advisor or via Self-Ser I authorize Luzerne County Contractors, including attendance, a placement records, and financial I authorize Luzerne County Contractors and I further facilitate the processing of this attendance and I understand that I am responsible when originally billed and due https://www.luzerne.edu/admissifinancial hold prohibiting access	e also applied to the College and rivice (if eligible). mmunity College to release and academic performance, classes, transactions to facilitate the prommunity College to contact my ther authorize my employer to degreement with Luzerne County to be for paying for any amounts for the term. For more informations/tuitionduedates.jsp. Failure	d plan to request red disclose to my encredits attempted, cessing of this agree y employer to confidisclose any of my Community College not covered by emption on payment de to pay within this	egistration through my imployer my education credits earned, career ement. firm any information I information needed to e. ployer reimbursement ue dates, please visit: period may result in a	
Student Signature		Date	2	
Employer Contact/Authorized Signature		Date	,	

Please scan and email this completed form to sponsorships@luzerne.edu or mail to Luzerne County Community College, Attn: Business Office, 521 Trailblazer Dr, Nanticoke, PA 18634