The following form(s) can be filled in on-line, then printed for signatures and mailing or faxing.

To begin filling out the forms in Acrobat Reader, make sure the 'hand' tool is selected then click on a line or in a box and begin typing. Check boxes can be clicked on or off.



Training and Education Coordinating Center (TECC) COMPUTER TRAINING APPROVAL

Name		_ SID no.						
Department	P	hone				. MS.		
COURSE NUMBER	COURSE TITLE			DATES/	TIMES		SUPE APPRO\	
	Prior supervisory approval must be obtai Completed form must be received by TECC		_	_				
mmediate supervisor		Date						
Appropriate administrator		Date						
Budget number								

CCS 9401 (Rev. 8/07) Marketing and Public Relations