SECTION III- Enrollment Certification
****Filled by Certification Official at Postsecondary Institution****

This document contains information exempt from mandatory disclosure under the FOIA. This document also contains personal information which is protected by the Privacy Act of 1974 and must be safeguarded from unauthorized disclosure.

Request the postsecondary institution provide the following information in order to certify member's enrollment to complete the application packet for TN STRONG Act tuition reimbursement.

Name of Student (Last, First, Middle Initial):	SSN: (Last 4)	Degree Major:

ENROLLMENT DATA

Class Start/End Dates (YYYY-MM-DD)		Course Number	Course Title	Total Hours	Tuition $ Per Hour	Course Fee	Total Tuition Charges
Start	End						
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00
							$ 0.00

Total Graduate Program Fees:

Total Course Fees: $ 0.00 Mandatory Fees:

Total Credit Hours Earned Towards Degree:	Number of Hours Enrolled:	Total Tuition and Fee Charges:
	0	$ 0.00

CERTIFICATIONS – The provisions described on this sheet are certified to be correct as of date signed below.

Printed Name of Certifying Official:	Email:

Signature of Certifying Official:	Educational Institution:	Date Signed: (YYYY-MM-DD)
	Select	

SECTION IV- STA MANAGER REVIEW

I certify that the Member's application packet contains all required documents and I have properly reviewed this application packet.

☐ Accepted ☐ Rejected

Tuition Amount Accepted:

STA Manager Signature: Date: