

From:
To: Vice President Continuing Education,
Coastal Carolina Community College
Subj: Request for Fee Exemption Status
Date:

- Ref. (a) NC Administrative Code, T23 Chapter 2(D)
(b) NC General Statute, Chapter 115D-5(b)
(c) E-mail from state auditor to VP CCCC dtd 7/11/01
(d) Minutes from mtg w/college administrators and state auditors on 2/13/02

1. Request that the following personnel

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

be allowed to attend Coastal Carolina Community College's Continuing Education class on

| <u>Class Name</u> | <u>Class Dates and Times</u> | <u>Class Location</u> |
|-------------------|------------------------------|-----------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

The above named personnel should be exempt from paying registration fees as the course material directly relates to their job performance.

Signature/Date

Emergency Services/Fire/Law Enforcement Agency Chief