



THE ADULT STUDIES PROGRAM **SPRING 2009**
 EMPLOYER TUITION DEFERRAL PROGRAM – GRADE RELEASE FORM

Student Name _____ SSN _____
Last First Middle Initial

Employer _____

I give permission for Virginia Wesleyan College to release my grade(s) for the Spring 2009 semester to my employer.

Signature of Student _____ Date _____

Send grades to _____ Courses _____

PLEASE SUBMIT A STAMPED ENVELOPE ADDRESSED TO YOUR EMPLOYER, WITH YOUR NAME & COURSE NUMBER(S)



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