



**GREAT BASIN COLLEGE
EMPLOYER REQUIRED CLASS**

Student Name: _____

Social Security Number: _____

Semester: Fall Spring Summer

Course:

(Call No. / Course / Course No. / Title)

Employer: _____

The above listed student is a non-resident, however, the student is employed full time and the course is required and sponsored by the employer.

This is to request in-state residency for this student while taking this course.

Approved Denied

Director of Admissions/ Registrar

Date