



**INDIANA HARBOR BELT RAILROAD CONTINUING EDUCATION  
CLASS REQUEST FORM FOR PARTICIPATION APPROVAL**

Date: \_\_\_\_\_

To: \_\_\_\_\_, Department Supervisor

Name: \_\_\_\_\_

Employee ID Number: \_\_\_\_\_

Position: \_\_\_\_\_

Work Location: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

College: \_\_\_\_\_

Degree: \_\_\_\_\_

Major: \_\_\_\_\_

Term Date: \_\_\_\_\_

Total Credit hours Obtained  
in the current year \_\_\_\_\_

Total Credits Required: \_\_\_\_\_

Expected Completion: \_\_\_\_\_

Title of Course(s): \_\_\_\_\_

Credit Hours: \_\_\_\_\_

Tuition Cost: \_\_\_\_\_

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**Approved**

\_\_\_\_\_  
**Received Date  
Approved**

\_\_\_\_\_  
**Department Supervisor, Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Received Date  
Approved**

\_\_\_\_\_  
**Director HR/LR Nicole Moore Parchem, Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Received Date**

\_\_\_\_\_  
**General Manager John Wright, Signature**

\_\_\_\_\_  
**Date**

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*The Indiana Harbor Belt Railroad may only reimburse an employee, up to six credit hours per semester, for tuition and certain related fees (Maximum of \$3000 per year) upon successful completion of authorized course(s) of study which must be related to the employee's current position or potential positions with the IHB.*