Request to Assess In-State Tuition Rates Under a Special Agreement Contract

Under a Special Agreement Contract with Mountain Empire Community College, _____ accepts responsibility for the in-state tuition payment of the following employees of this company:

Employee	**SS#**	**Term**	**Credits**

_____ _____
Authorized Signature Date

Please forward this request to:

Enrollment Services/ Registrar
Mountain Empire Community College
3441 Mountain Empire Road
Big Stone Gap, VA 24219
Phone: (276) 523-2400