

**SEATTLE COMMUNITY COLLEGES**  
North Seattle-Seattle Central-South Seattle-Seattle Vocational Institute

**EMPLOYEE SPACE-AVAILABLE TUITION WAIVER PROGRAM**

**Certification of Employment Form**

<b>To Be Completed by Eligible State Employees Working at Least 50%</b>	
<b>Employee Name:</b>	<b>Student ID Number:</b>
<b>Address City State Zip:</b>	
<b>Name of State Agency, College or University:</b>	
<b>Job Title/ Business Phone:</b>	
<p style="text-align: center;">TO BE COMPLETED BY EMPLOYEE'S SUPERVISOR OR PERSONNEL OFFICE</p> <p>I verify that _____ is an Employee Name</p> <p>eligible state employee employed halftime or more with _____ Agency Name</p> <p>and holds the position of _____ Title</p> <p>If the student is a K-12 employee: I verify that the employee is a teacher or other certificated instructional staff employed at public common and vocational schools, holding or seeking a valid endorsement and assignment in the state identified shortage area of: _____.</p> <p>For a current list of the state identified shortage area click or go to the following link:  <a href="http://www.sbctc.ctc.edu/college/finance/stateemployeeattachment.pdf" style="color: red;">http://www.sbctc.ctc.edu/college/finance/stateemployeeattachment.pdf</a></p>	
<b>Name of Supervisor or Personnel Officer:</b>	
<b>Address City State Zip:</b>	
<b>Phone (Area Code):</b>	
<b>Signature of Supervisor or Personnel Officer:</b>	
<b>Date:</b>	
<b>Signature of Employee:</b>	<b>Date:</b>

09/12/11