

IFCA Tuition Sponsorship Application

(REIMBURSEMENT IS SUBJECT TO APPROVAL AND AVAILABILITY)

Section A: Contact Information

Name _____

Address _____
INCLUDE CITY AND STATE

Telephone _____ Social Security Number _____

Section B: Employment

Occupation / Position _____

Union/Local (if applicable) _____

Length of Employment _____

Current or Most Recent Employer _____

Address _____ Telephone _____

Date of Last Employment _____

Previous Employer _____

Address _____ Telephone _____

Section B: Course Information

Course Selection Information _____ Date Course Begins _____

Institution Name _____ Telephone _____

Course Title and Number _____

Applicant's Signature _____

Employer's Signature/Approval _____

Please return completed application by facsimile to (610) 225-1052.

Or mail to:

IFCA • 150 S. Warner Road Suite 245, King of Prussia, PA 19406

Office: (610) 225-1050 • **Fax:** (610) 225-1052

REMINDER: Applicants must comply with IFCA's Educational Guidelines!

The day class begins, students have thirty (30) days to mail IFCA a copy of the completed Tuition Sponsorship Application.

IFCA Computer Training Application Form

Section A: Contact Information

Name of Student _____

Company Name of IFCA Contractor Member _____

Address of Company (include City, State, Zip) _____

Telephone _____ Fax Number _____

Section B: Training Center

Name of Professional Computer Training Center _____

Address (include City, State, Zip) _____

Telephone _____ Contact Name _____

Class Title _____

Section B: Signatures

Applicant's Signature _____

IFCA Contractor Member's Signature _____

IFCA Executive Director's Signature _____

Please return completed application by facsimile to (610) 225-1052.

Or mail to:

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Office: (610) 225-1050 • **Fax:** (610) 225-1052

All applications must be approved of and signed by IFCA'S Executive Director.

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