

**HEERF Professional Supplemental Instruction**

**Request Form**

**2021-2022**

**This form is to be completed when requesting approval for Professional Supplemental Instruction assistance.**

**All sections must be completed prior to submitting for review.**

**COURSE NAME:**

**SECTION NUMBER(S):**

**RECOMMENDED INSTRUCTOR:**

**ESTIMATED NUMBER OF HOURS:**

**BRIEF DESCRIPTION OF WORK:**

NAME:

Signature:

Printed Name of Dean:

Signature of Dean: