



NeighborHOOD Partner Program Authorization Form for Frederick Chamber of Commerce Members

Thank you for your interest in Hood College and the NeighborHOOD Partner Program. This form must be completed for each semester the student plans to enroll at Hood. The member business must submit the completed form to the Chamber for final verification and processing by Hood College.

Member Organization:	_____			
Planned Semester Enrollment (indicate year)	Fall ___	Spring ___	Summer 1 ___	Summer 2 ___
College Level:	Undergraduate ___	Graduate ___		
Major/Program:	_____			

Employee Name:	_____
Street:	_____
City, State, Zip:	_____
Phone:	_____
Email:	_____

I understand that Hood College reserves the right to request appropriate proof of the relationship between me and any student receiving this tuition discount by virtue of my employment, including but not limited to proof of marital status and/or proof that the recipient qualifies as a dependent child in accordance with IRS regulation. My signature provides approval for Hood College to contact the employer for the purpose of obtaining or verifying any information required for this program and acknowledges the privileges and limitation of the NeighborHOOD Partners Program as outlined at www.hood.edu/NeighborHOOD:

Signature: _____ Date: _____

Student Name:	_____
Student ID Number (if known):	_____
Relationship to employee:	Self ___ Spouse ___ Dependent Child ___
Street:	_____
City, State, Zip:	_____
Phone:	_____
Email:	_____

The employee must be employed by the Chamber member no later than the first day of the semester the student intends to enroll and only after any employer-funded education benefits have been fully utilized.

<input type="checkbox"/> Employment verified	<input type="checkbox"/> Employer-funded education benefits utilized
<input type="checkbox"/> Chamber verified	<input type="checkbox"/> Spouse/dependent verification

Authorizing Officials

Employer name: _____	Chamber name: _____
Signature/Date: _____	Signature/Date: _____

Chamber Office:

For undergraduate candidates, please return completed form to admission@hood.edu.
For graduate candidates, please return completed form to gofurther@hood.edu.