**Educational Aid Promissory Note**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ request an advance of funds for the purpose of prepayment of tuition to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I promise to repay this prepayment in its entirety if documentation of satisfactory course completion is not provided by \_\_\_\_\_\_\_\_\_\_\_\_\_\_. I understand and agree that my paycheck or any other funds due me from Thomas Nelson Community College may be withheld until this promissory note is satisfied.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Human Resources signature Date

|  |  |
| --- | --- |
| Disbursement check number: | *Check made payable to:* |
| Amount of check: | *Date of check:* |
|  |  |
| Payment of Promissory Note Dated: |  |
| Date Received: | *Amount $* *[ ]  Cash* *[ ]  Check* |
| Payment received by: |  |