TDOT APPLICATION
FOR CE MASTERS PROGRAM

I.   **IDENTIFYING INFORMATION**

1.   **Applicant's Name** _____

                          First   Middle   Last

2.   **Job Assignment:**

          a.   **Position Title** _____

          b.   **Department ID Number** _____

          c.   **Work Phone** _____

          d.   **Employee Identification Number** _____

3.   **Service:**

          a.   **Total Service with Department of Transportation** _____

          b.   **Total Service with State of Tennessee (If Different)** _____

4.   **Job Performance Evaluation:**

          a.   **Date of Last Evaluation** _____

          b.   **Current Overall Performance Evaluation Score** _____

5.   **Insert Image/Screenshot of Semester Class Schedule:**

APPROVAL

_____
Applicant's Signature   **Date**   **Title**

_____
Unit Supervisor's Signature   **Date**   **Title**