



**STATE TECHNICAL COLLEGE OF MISSOURI**  
**UNIFORM CREDIT REQUEST FORM**

Student Name \_\_\_\_\_ ID \_\_\_\_\_

Semester (circle one) Fall Spring Summer Year \_\_\_\_\_

Major \_\_\_\_\_

Form must be received NO LATER than the end of the first week of the semester to receive full credit.

Reason for Credit (check one):

\_\_\_\_\_ Major is declared, but I am enrolled in General Education courses only.  
(Copy of schedule must be attached)

\_\_\_\_\_ I pay my employer for uniforms and will wear these uniforms while enrolled.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Department Chair Signature \_\_\_\_\_ Date \_\_\_\_\_

Business Office Signature \_\_\_\_\_ Date \_\_\_\_\_

Adjusted by _____ Date Adjusted _____ Adjustment Amount _____
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