

Instructions

This is a view-only Google document. To complete it:

1. Go to File → Make a Copy to create your own editable version.
 2. Fill out all sections completely.
 3. Email the completed form to policeacademy@angelina.edu before the registration deadline. *Note: If an individual does not have an AC Student I.D., they will be required to complete an [admissions application](#).*
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Date:

Angelina College
Semester: (ex. Fall 2026 or Spring 2027)
Attention: Business Office
P.O. Box 1768
Lufkin, TX 75902

Subject: Law Enforcement In-Service Training Employer Payment Authorization Letter

Dear Angelina College Business Office,

Please consider this letter as confirmation that (Agency Name) agrees to pay tuition and fees for the following employees enrolled in (Course Name):

AC Student I.D. or DOB	Last Name	First Name	Billing Contact Email Address

Please send all billing and related correspondence to the contact listed above.

Sincerely,

(Employer Name)
(Agency/Company Name)
(Address)
(Phone Number)
(Email Address)