

Beaufort County Community College

Business Card Approval Form

Employee Name:	
Department:	
Title:	
Address: P.O. Box 1069 5337 Highway 264 East Washington, NC 27889	
Phone Number:	
Fax Number:	
Email Address:	
Web Address: www.beaufortccc.edu	
Employee's Signature:	Date:
Supervisor's Signature:	Date:
President's Signature:	Date:

Instructions:

- Please enter all information as it should appear on the business card.
- Once form is completed and approved by the supervisor, forward to Tricia Woolard, Coordinator of Educational Media/Graphics Services/Blackboard Administrator/Webmaster so she can create a proof.
- Forward this form and proof to President's Office for approval.
- If approved, President's Office will forward to the Print Shop for printing.