

TUITION EXCHANGE PROGRAM APPLICATION

Section 1: Employee Information

Name	<input type="text"/>	College/Department	<input type="text"/>
Position Title	<input type="text"/>	Email	<input type="text"/>
Campus Address	<input type="text"/>	Campus Phone	<input type="text"/>
Home Address	<input type="text"/>	Home Phone	<input type="text"/>
University ID (Look up)	<input type="text"/>		

Certification of five years of full-time employment by HR Officer:

Begin date in HR record

Name/Title	Signature	Date
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Section 2: Student-Applicant Information

Name	<input type="text"/>	Birth Date	<input type="text"/>
Last four digits of SSN	<input type="text"/>	Student Email	<input type="text"/>
Home Address	<input type="text"/>	Home Phone	<input type="text"/>
Does this child qualify as your eligible IRS tax dependent?	<input type="text"/>	(If no, then you are not eligible for application.)	

*This application must be accompanied by three years of IRS forms that will be used to verify student dependent status.
In the event that it is necessary to break a tie for eligibility, you will be asked to submit a FAFSA financial aid form.*

Section 3: Host Institutions

Names of college/university to which student is applying:

TEP College/University	Applied?	Non-TEP College/University	Applied?
1. <input type="text"/>	<input type="text"/>	1. <input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	2. <input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	3. <input type="text"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>	4. <input type="text"/>	<input type="text"/>
5. <input type="text"/>	<input type="text"/>	5. <input type="text"/>	<input type="text"/>

Is this student applying to Drexel?

I have provide complete and accurate information on this application in accordance with the Tuition Exchange Program.
I understand that the Tuition Exchange Program provides only access to scholarship and is not a guarantee of a scholarship.
I understand any inaccurate information may adversely affect access to the Tuition Exchange Scholarship Program.

Signature of Employee: _____ Date: _____

Return complete forms along with a \$35 check (application fee) made payable to Drexel University to:
Laura Estrella-Mentzer, Benefits Coordinator: 3201 Arch St, Ste 430