

**LEWIS & CLARK COLLEGE
TUITION EXCHANGE INC.
PRELIMINARY APPLICATION FOR SCHOLARSHIP**

Lewis & Clark faculty and staff members with dependents planning to attend another college or university under the Tuition Exchange, Inc. should complete this form and return it to the Tuition Liaison Officer. Submission of this application should coincide with application for admission to any of the exchange schools. Certification of eligibility for this program does not guarantee acceptance to host institutions either for admission or tuition exchange.

Eligibility to apply for a TE scholarship is determined by Lewis & Clark's current Tuition Assistance Programs Policy available in Human Resources.

TO BE COMPLETED BY PARENT/EMPLOYEE

NAME _____ HOME PHONE _____ WORK PHONE _____

ADDRESS _____

DATE EMPLOYED ____/____/____ DEPT _____ FTE _____

IS STUDENT YOUR DEPENDENT AS DEFINED IN THE TUITION ASSISTANCE PROGRAM POLICY? _____

All of the information on this form is true and complete to the best of my knowledge. If asked by Lewis & Clark, I agree to give proof of dependency. I realize that this proof may include a copy of my U.S., State, or local income tax returns.

PARENT SIGNATURE

DATE

A \$35 yearly application fee must accompany this form when submitted to the Tuition Liaison Officer.

TO BE COMPLETED BY STUDENT-APPLICANT

NAME _____ DATE OF BIRTH _____ SSN _____ - _____ - _____

ADDRESS (if different from above) _____

STUDENT'S EMAIL ADDRESS _____ RELATIONSHIP TO EMPLOYEE _____

NAMES OF COLLEGES & UNIVERSITIES WHERE TUITION EXCHANGE IS DESIRED:

AT THE BEGINNING OF THE **2006/07** ACADEMIC YEAR, I WILL BE:

Please circle one: High School Senior **OR** Year in College: Freshman Sophomore Junior Senior

Did you hold a tuition exchange scholarship last year or in any prior year? Yes No

If yes, name of institution: _____

STUDENT SIGNATURE

DATE