

**LEWIS & CLARK COLLEGE  
TUITION EXCHANGE INC.  
RECERTIFICATION 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. 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.

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**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.

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**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:

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AT THE BEGINNING OF THE NEXT 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