



## Wesley College

### TUITION EXCHANGE SCHOLARSHIP PROGRAM APPLICATION

The purpose of the Tuition Exchange (TE) Scholarship Program is to give the opportunity for full-time employees and their spouse or dependents to earn a degree. Wesley College participates in the TE program with 590 colleges and universities as well as the Council of Independent Colleges (CIC) Program, in support of acquiring a college degree.

Guidelines for the TE program are explained in Policy 4.10 which can be found on Wesley.edu, click Campus Services>Human Resources>Staff Policies.

This application must be completed and returned to the Human Resource Office, CC318, by **4 PM on October 27, 2017**, one year prior to the student's first fall semester of enrollment at a participating exchange institution. Employees will be notified if they are eligible for participation in the program by December 8, 2017.

Please complete one application per dependent.

#### EMPLOYEE'S INFORMATION: (Please print)

Name: \_\_\_\_\_  
Last First MI

Position: \_\_\_\_\_ Department: \_\_\_\_\_

Date of Hire: \_\_\_\_\_

Do you have other dependents currently enrolled in a college participating in the Exchange Scholarship Program?

YES  NO

#### STUDENT'S INFORMATION:

Name \_\_\_\_\_ Last 4 of Social Security Number \_\_\_\_\_  
Last First MI

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Student email: \_\_\_\_\_ Student phone number: \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Anticipated Tuition Exchange Enrollment Semester & Year: \_\_\_\_\_

Anticipated Tuition Exchange Program Class Year:  Freshman  Sophomore  Junior  Senior



Please list those institutions for which the Exchange Scholarship Program eligibility certification is desired. Please list only those schools to which the students actually apply. The student must meet all admission deadlines established by each institution. For a list of participating Exchange Scholarship Program institutions, consult the Exchange Program website at: [www.tuitionexchange.org](http://www.tuitionexchange.org) or the CIC site at: [www.cic.edu/Programs-and-Services/Tuition-Exchange-Program/Pages/Participating-Institutions-List.aspx](http://www.cic.edu/Programs-and-Services/Tuition-Exchange-Program/Pages/Participating-Institutions-List.aspx).

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I hereby certify that my dependent child meets the eligibility requirements (outlined above) to receive benefits under the Tuition Exchange Scholarship Program and that the information on this application is accurate and complete.

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Employee's Signature

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Date

**UPON COMPLETION SUBMIT TO:**

**Wesley College**  
**Human Resources Office**  
**Phone: (302) 736-2305**  
**Email: [Brenda.gardels@wesley.edu](mailto:Brenda.gardels@wesley.edu)**