THE TUITION EXCHANGE. INC.
1743 Connecticut Avenue, MW Washington, DC 20009

SCHOLARSHIP CERTIFICATION & APPLICATION

_____ _____ _____
Student Name Social Security Number Telephone

_____ _____
Permanent Address Parent/Guardian Name

TO: _____ _____
Importing Liaison Officer Name of College or University

_____
Address

FROM: _____ _____
Exporting Liaison Officer Name of College or University

_____
Address

To be completed by exporting institution liaison officer:

I certify that this applicant is eligible to apply for a TE Scholarship for:

Academic years _____(Total number of years) Total number of semesters _____

This applicant is requesting a TE scholarship at your institution and is
_____ Applying for admission as a:
_____ Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduate Student
_____ Accepted for admission as a:
_____ Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduate Student
_____ Currently enrolled as a:
_____ Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduate Student

Signature _____ _____ _____ _____
Exporting Liaison Officer Title Date Telephone

This student has made application to _____ schools for the Tuition Exchange benefit

NOTICE OF ACCEPTANCE OR REJECTION

To be completed by importing institution liaison officer:

_____ We have not awarded a TE scholarship to the above-named applicant

_____ We have awarded a TE scholarship to the above-named applicant for academic year(s) _____ , for a total of _____ semesters. The value of the first year TE scholarship is $_____. The following limits apply to the scholarship:

Signature _____ _____ _____ _____
Exporting Liaison Officer Title Date Telephone