



[WWW.TUITIONEXCHANGE.ORG](http://WWW.TUITIONEXCHANGE.ORG)

**APPLICATION TO PARTICIPATE  
IN THE TUITION EXCHANGE, INC. PROGRAM FOR 2021-2022**

**DEADLINE FOR RETURN: Tuesday, October 20, 2020**

**PLEASE PRINT CLEARLY**

**EMPLOYEE INFORMATION**

Employee's Name: \_\_\_\_\_

Ext.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Home telephone Number: \_\_\_\_\_ Full-Time Date of Employment \_\_\_\_\_

Full-Time Years of Service as of 9/1/21 \_\_\_\_\_

Have you received a Tuition Exchange, Inc. scholarship in the past?  Yes  No

If Yes, please indicate dates when scholarship was utilized \_\_\_\_\_

**STUDENT INFORMATION**

Student's Name: \_\_\_\_\_

Student's Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_ / \_\_ / \_\_\_\_

Relationship to Employee: \_\_\_\_\_

Student's Permanent Home Address: \_\_\_\_\_

Student's Home Telephone Number: \_\_\_\_\_

Student's E-mail Address: \_\_\_\_\_

Name(s) of institution(s), **that participate(s) in Tuition Exchange, Inc.**, to which student is applying:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Student's Current Status:  High School  Freshman  Sophomore  Junior  Senior  
(Please check all that apply)  College/University

High School/College Currently Attending: \_\_\_\_\_

**Please return to:**  
**Carolyn Ventura Lengers**  
**University Benefits**  
**Summit, Room 41**  
**Valhalla**  
**Fax: (914) 989-8506**  
**Scan/E-Mail: [benefits@pace.edu](mailto:benefits@pace.edu)**

\_\_\_\_\_  
Employee's Signature  
\_\_\_\_\_  
Date