

Tuition Exchange Program³ Student Application

For new enrollment during the 20__³20__ academic year

Student Information

First Name: _____ Last Name: _____
S.S.N (last 4): _____ Date of Birth: _____
Address: _____

You can confirm their participation at

www.cic.edu/tepinstitutions

Importing institution(s)	State:
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

Application Procedures