ELCA COLLEGE AND UNIVERSITY TUITION EXCHANGE PROGRAM **APPLICATION FORM**

Section A: To be completed LEMPLOYEE. 6 X E P L W W R \ R X U W X L W L R Q H [F K D Q J H R I

First year and transfer applicants VKRXOG DWWDFK D FRS\ RI WKLV IRUP ZLWK 6HFWLR IRU DGPALIYADDLICENTOS VKRXOG DOVR FRPSOHWH D ILQDQFLDO DLG IRUP WKUR VHQW GLUHFWO\ WR WKH UHFHLYLQJ LQVWLWXWLRQ

Employee Name College/University Position Student Name		[]Administrative Staff			
will attend			during the (first year, sophomore, junior, senior, other).		
Section B: To be completed V W5 H W D L Q D FRS\		TUTION . 6 H	QG D FRS\	WR WKH	
If attending home institution, Comments:	applicant would	be eligible to re	eceive % o	of home institu	tion tuition.
Sending Institution Tuition Exchange Officer: Phone Email	Da	ate			
Section C: To be completed FRQILUPHG EXW (9RFDWLRQ DQG (G	by tR€CEIVING QR ODWHU \	INSTITUTION. WKDQ 0D\	:KHQ DSSC VHQG D	OLFDQW¶V FRS\ RI	WKLV IRUP ZL
Maximum benefit available t	student \$				
Benefit provided by:	Federal grant State grant Other	\$			
Receiving Institution Tuition Exchange Officer Phone Email					