

WPI Tuition Exchange (TE) Application to Participate Fall 2010 / Spring 2011 Academic Year

(Please fill out one application per dependent)

Employee's Name: _____
Last
First
Middle

WPI Department: _____

Employee's WPI email: _____
 No email access _____

Employee's telephone number : _____

Dependent's Name: _____
Last
First
Middle

Dependent's Social Security Number: _____

Dependent's Address: _____

Dependent's Telephone Number: _____

Is dependent currently a senior in high school? (select one) Yes No If no, what year in college will your dependent be next year 2010-2011 academic year? (select one) 2nd 3rd 4th

List the TE Institutions that the dependent will be applying for admission or currently attending for the 2010-2011 academic year.

Name of School	City, State	Name of School	City, State

TE institutions may be added/deleted after the application is submitted through February 1, 2010 by contacting Patty MacInnes (macinnes@wpi.edu) in writing.

I certify that I will agree to the conditions of the TE program as required by WPI (the sponsor institution), the TE host institution, and the TE itself. I certify that the above individual can be claimed as my legal dependent based on the 2010 tax year based on IRS guidelines.

 Employee's Signature Date

Return to the Human Resources Office no later than October 15, 2009.

For HR office use only:
 H.R. Authorized Signature: _____ Date: _____
 Employee DOH _____