WPI Tuition Exchange (TE) Application to Participate

Fall 2020 / Spring 2021 Academic Year (Please fill out one application per dependent)

This application needs to be submitted to the WPI Office of Financial Aid <u>no later than</u>
Friday, September 27, 2019!

Employee's Name:				
	Last	First	Middle	
Employee's Address:				
Employee's WPI or Home email: No email access				
Employee's telephone number : _ Employee's Department:				<u> </u>
Dependent's Name:	 Last	First	Middle	
Dependent's Social Security Number:	XXX-XX-	Date of Birth:		
Dependent's Address:				
Dependent's Telephone Number:			_	
Dependent's Email Address:				
Is dependent currently a senior in high school? (check one)	Yes No	If no, is the student currently attending college?	Yes N	o
If they are currently attending college,	what is the nam	e of the institution?		
What year in college will your depende	nt be in the nex	t academic year 2020-2021 (circle one) 1st	2^{nd} 3^{rd}	4 th
List the TE Institutions that the depend the 2020-2021 academic year.	ent will be apply	ying for admission or currently attending for		
Name of School City, State		Name of School City, State		_
				_ _ _
TE institutions may be added/deleted a Bridget Nault (benault@wpi.edu) in wr		tion is submitted through February 1, 2020 b	by contacting	_
		ogram as required by WPI (the sponsor instit dividual can be claimed as my legal depende)
Employee's Signature		 Date		