

**THE TUITION EXCHANGE, INC.**  
**CASE WESTERN RESERVE UNIVERSITY**

**SCHOLARSHIP CERTIFICATION & APPLICATION**

*To be completed by applicant:*

Applicant Name Social Security Number Birth Date

Permanent Street Address City State Zip

Student E-mail Address Student Telephone Number Year in school for 2022-23

Parent/Employer Name Parent/Employer Campus E-mail Campus Phone Number

I confirm that the student listed above is my dependant for Case Western Reserve University benefit purposes. Employee signature required below.

To be completed by applicant:

1 Host (Importing) Institution City/State Date Applied

2 Host (Importing) Institution City/State Date Applied

3 Host (Importing) Institution City/State Date Applied

4 Host (Importing) Institution City/State Date Applied

5 Host (Importing) Institution City/State Date Applied

6 Host (Importing) Institution City/State Date Applied

7 Host (Importing) Institution City/State Date Applied

8 Host (Importing) Institution City/State Date Applied

Staff/Faculty Member Signature/Date

Return this form to the Office of University Financial Aid in Yost Hall 435 when the student is **applying for admission or July 1, 2022**, whichever is earlier. Please notify this office of your acceptance / refusal of a tuition exchange scholarship by **July 15, 2022**.