



RECERTIFICATION APPLICATION - TUITION EXCHANGE PROGRAM

FOR 2026-2027

DEADLINE FOR RETURN: Friday, October 17, 2025

EMPLOYEE INFORMATION

Employee's Name: _____

Ext.: _____ E-mail: _____

Home Telephone Number: _____

STUDENT INFORMATION

Student's Name: _____

Student's Social Security Number: XXX-XX- _____ Date of Birth: _____

Relationship to Employee: _____

Student's Permanent Home Address: _____

Student's Home Telephone Number: _____

Student's E-mail Address: _____

Name of institution that student will be attending through the Tuition Exchange program in 2026-2027:

Type of scholarship awarded:

☐

Tuition Exchange, Inc.

(Please check only one)

☐

Council of Independent Colleges

Student's Anticipated College Graduation Date: _____

Please return to:

**University Benefits
Goldstein Academic Center
Pleasantville Campus**

Employee's Signature

Date

**Fax: (914) 989-8506
Scan/E-Mail: benefits@pace.edu**