

# CORNELL COLLEGE TUITION REMISSION APPLICATION

1. Student Name \_\_\_\_\_  
Student SS# \_\_\_\_\_ Home Phone \_\_\_\_\_  
Student Address \_\_\_\_\_  
Name of Cornell Employee \_\_\_\_\_  
Current Position \_\_\_\_\_
2. Date of Employment/  
or continuous years of service \_\_\_\_\_
3. Academic Year student is applying for tuition remission? \_\_\_\_\_
4. Does the student reside with Cornell employee? \_\_\_\_\_  
If no, will employee provide more than 1/2 the support  
during the academic year for the student in the year  
applying? \_\_\_\_\_
5. Which tuition remission program(s) is student applying for? (Please mark all that apply)  
\_\_\_\_\_ Faculty/Staff \_\_\_\_\_ ACM Tuition Exchange \_\_\_\_\_ National Tuition Exchange
6. List colleges where your student plans to apply:
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
  - d. \_\_\_\_\_

**Please return this application by December 18, 2009 to:**

Cindi Reints  
Office of Financial Assistance  
Wade House

cc: Human Resource Director