



Application for FACHEX and/or Tuition Exchange Program for Employees
Fall 2020 (Exports)

Please complete this form, save, then e-mail to Kristen Smith, Associate Director of Undergraduate Admission, kesmith@fairfield.edu, no later than October 1, 2019.

PARENT-EMPLOYEE INFORMATION:

Name: _____ Employee ID: _____

Campus Address: _____ Campus Phone: _____

Department: _____ Date Employed: _____ Fulltime Yes
 No

Position/Title: _____ E-Mail Address: _____

Signature: _____ Date: _____

Please select below the program(s) you are applying for:

Fachex **Tuition Exchange** **Both**

STUDENT-APPLICANT INFORMATION:

Name: _____ DOB: _____ SSN# (last 4 digits): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-Mail Address: _____

List the FACHEX and/or Tuition Exchange colleges or universities to which your child plans to apply:

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

To be eligible, your SON/DAUGHTER must be a full time student at the beginning of the next academic year (Fall 2020) and you must meet a minimum of 4-years of service by September 1, 2020.