

Associated Colleges of the Midwest  
**Tuition Remission Exchange Program (TREP)**

**APPLICANT'S CERTIFICATION OF ELIGIBILITY**

**FALL 2015 AND SUBSEQUENT YEARS**

Complete and return to the TREP Coordinator at your college. Upon receipt of this form and the \$25.00 participation fee (payable to ACM), the Coordinator will forward this information to the ACM office.

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**To be completed by the applicant:**

I plan to apply to the following ACM colleges under the Tuition Remission Exchange Program (*please circle*):

<b>Beloit</b>	<b>Coe</b>	<b>Colorado</b>	<b>Cornell</b>	<b>Grinnell</b>	<b>Knox</b>	
<b>Lake Forest</b>	<b>Lawrence</b>	<b>Luther</b>	<b>Macalester</b>	<b>Monmouth</b>	<b>Ripon</b>	

I understand that the colleges will notify me of their decisions regarding admission and tuition remission. When I decide to accept an offer of tuition remission or to withdraw from TREP, I will fill out a Confirmation of Participation form and return it to the TREP coordinator at my home college. If, in the meantime, I apply to additional ACM colleges under TREP and/or decide not to apply to one or more of the colleges circled above, I will notify the TREP coordinator at my home college of the change(s).

Parent Signature \_\_\_\_\_

Parent Name (please print) \_\_\_\_\_

Student Signature \_\_\_\_\_

Student Name (please print) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

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**To be completed by the home college TREP coordinator:**

I certify that this applicant is eligible to participate in the ACM Tuition Remission Exchange Program at the colleges circled above. I further certify that the applicant and her/his guardian have received a copy of the "Applicant's Guidelines" for TREP and that we have discussed these guidelines.

TREP Coordinator \_\_\_\_\_

College \_\_\_\_\_

Date \_\_\_\_\_

*Please send to ACM, Suite 800, 11 E. Adams Street, Chicago, IL 60603*

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**For ACM Office Use Only**

Year of Application \_\_\_\_\_ Year of Match \_\_\_\_\_