



Hampshire College

Council of Independent Colleges Tuition Exchange Verification Form

Please print clearly and complete all information requested.

Employee Information

Employee Name: _____

Department: _____

Email: _____ Extension: _____ Home Telephone: () _____

Dependent #1 Information

Name: _____

Relationship to employee: Son Daughter

College/University student will be attending: _____

Student will be enrolled in: Academic Year 20____ - 20____ Summer Fall Spring

Dependent #2 Information

Name: _____

Relationship to employee: Son Daughter

College/University student will be attending: _____

Student will be enrolled in: Academic Year 20____ - 20____ Summer Fall Spring

Procedures and Policy for CIC-TEP Benefit

Employees must re-verify their eligibility for this benefit once a year. Employees are required to supply the Human Resources office with all of the following:

- a CIC-TEP Student Application
- official verification that the child is a dependent (copy of most recent tax return)

Submitted by: _____ Date: _____

Employee's Signature

The following information is completed by Human Resources

Date of Hire: _____ FTE: _____ Faculty Administrator Staff

Proof of dependent status CIC-TEP Student Application Copy to Liaison Officer

Date Submitted to Host Institution: _____

Notification Received from Host Institution: _____ Accepted Denied
Date Received

Employee Notified Date: _____ By: _____

FTE Verification: Summer _____ Fall _____ Spring _____
(HR initials or N/A)