



Tuition Assistance Application ESOL Summer Program 2009

Part IV

1. Name _____ 2. Social Security Number: _____ - _____ - _____
(first name) (last name) (if available)

3. **Mailing** Address:

Street Address: _____

City, State, Zip: _____

4. Phone: _____

5. E-mail: _____

6. All students are expected to pay at least 25 percent of the cost (\$100.00) How much tuition assistance would you need to attend? _____

7. Please tell us why you need help paying the tuition.

What expenses do you have now?

How have you been paying your expenses up to now?

All Applications for Participation and Tuition Assistance, and the Letter of Recommendation, must be received by UNH Manchester Center for Academic Enrichment by Monday, May 18, 2009.

This application should be used only for the Summer ESOL Program. It does not constitute an application to UNH Manchester. Deliver or mail forms to the Center for Academic Enrichment at UNH Manchester, 400 Commercial St., Manchester, NH 03101

