



Tuition Discount Alliance Program Application

The Alliance Program Scholarship is in the form of a 20% tuition discount for students employed or otherwise associated with an Academy College Alliance Partner.

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|------|---------|------------|
| Name | Program | Start Date |
|------|---------|------------|

Alliance Partner

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|----------------------------------|
| Name of Business or Organization |
|----------------------------------|

Alliance Partner certification and signature:

The student named above is currently associated with our company as a

- Employee
 Employee's Immediate Family (spouse, dependent child)

| | | |
|---------------------------------|-------|-----------|
| | | |
| Alliance Partner name (printed) | Title | Signature |

Student certification and signature:

I understand the following:

- I must be currently associated with the Alliance Partner
- I must be currently enrolled in a program leading to a certificate or degree
- I must complete a confirmation form at the end of each quarter signed by the Alliance Partner

| | |
|--------------------------------------|------|
| Student Signature | Date |
| Admissions Department Representative | Date |
| Campus Director Approval | Date |

Office use only

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|--------------------|-------------------------|
| Add Agency Sponsor | Business Office Initial |
|--------------------|-------------------------|