



WORKFORCE EDUCATION GRANT APPLICATION INSTRUCTIONS 2020-2021

This funding is available based on an applicant's eligibility and documentation of financial need. Occupationally related courses are eligible for Workforce Education Grant (WEG) funding and they include: Accounting/Bookkeeping & QuickBooks Certificate; Certified Nurse Aide (CNA); Computer Aided Drafting (CAD); Computer Skills for Business Certificate; Dental Assistant; Heating, Ventilation & Air Conditioning (HVAC); Industrial Maintenance Technician Certificate; Law Enforcement Academy; Fire Academy & EMT (*Online Only*); Machining & CNC; Clinical Medical Assistant; Medication Aide; Pharmacy Technician; Truck Driving Academy; Welding Certificate; Pipefitting Certificate; and Construction Trade.

Listed below are the instructions for applying for this grant. Funds will be awarded throughout the year until depleted. The maximum award per person per year is up to \$1200. All submitted applications must be complete to determine eligibility and documentation of need. Please read the instructions below, and if you need assistance please call 817-598-8870.

- ⇒ Please complete the student status on page 1 to determine whether you are dependent or independent
- ⇒ Complete **ONLY** the dependent or independent part of the application, not both
- ⇒ Provide page 1 & 2 of your 2018 Tax return; if you are a dependent include your parent's 2018 documentation
- ⇒ **Only complete applications will be accepted. If the application is not complete it will be mailed back to you.**
- ⇒ **You are only eligible to receive funding once you are enrolled in a program and/or class. No funds are held for incomplete registration packets.**
- ⇒ Funding is subject to change each year.
- ⇒ **WEG PROBATION:** If student does not successfully complete the program in which WEG funding was awarded, student will be placed on WEG Probation. The student will be given one final opportunity to apply for WEG. If the student does not successfully complete the WEG funded program a second time, student will become ineligible to receive any future WEG funding.



Office Use Only:	
Received by _____	
Date _____	
Time _____	
2018 Taxes _____	

WORKFORCE EDUCATION GRANT APPLICATION 2020-2021

THIS APPLICATION IS FOR AID FOR WORKFORCE EDUCATION CLASSES ONLY!

Supporting documentation **MUST** be attached to this application (including hardcopies of tax forms, benefit statements, etc..)

***** Please attach a copy of 2018 income tax returns and/or benefit statements to this application. *****

NAME (please print) _____ Phone # _____

SS# _____ Date of Birth _____ Current Age _____

Mailing Address _____ City _____ State _____ Zip _____

Program of Study _____ Campus _____

STUDENT STATUS

1. Was the student born before January 1, 1997?
Yes No
2. Is the student an orphan or a ward of the court, or is the student an emancipated minor?
Yes No
3. When the student was 13 or older, were both of the student's parents deceased, was the student in foster care, or was the student a dependent of the court?
Yes No
4. At any time on or after July 1, 2019 did the student receive an official determination that the student is an unaccompanied youth who is homeless or at risk of being homeless?
Yes No
5. Is the student a veteran of the US Armed Forces, or will be a veteran as of June 30, 2021, or is the student currently serving on active duty?
Yes No
6. Is the student currently married?
Yes No
7. Will the student be working on a degree beyond a bachelor's degree in school year 2020-2021?
Yes No
8. Does the student support dependents, other than a spouse?
Yes No

***If ALL answers are NO, complete DEPENDENT Student pages 2;
Otherwise complete the INDEPENDENT Student pages 3***

DEPENDENT STUDENT INFORMATION

Did you answer "no" to all questions on page 1? If you did please continue. If you did not go to page 3.

1. Parent's Marital Status

Married Divorced Separated Widowed Single

2. Family Size Include

- Yourself, and your parent(s) (including adoptive and step parents) even if you do not live with your parent(s)
- Your parent(s)'s other children if your parent(s) will provide more than half of their support from July 1, 2020, through June 30, 2021.
- Include other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2021.
- Include the name of the college for any household member who will be attending college at least half-time between July 1, 2020 and June 30, 2021, and will be enrolled in a degree, diploma, or certificate program.

First Name	Last Name	Age	Relationship to student (parent, brother, sister, etc.)	If this person will attend college half-time or more in 2020-2021, print the name of the college	Will be enrolled in at least 6 credit hours? Yes or No
			SELF	WEATHERFORD COLLEGE	

3. Current Home State/Province of Student _____

FINANCES

Dependent Student and Parent 2018 Income

	Parent's Info	Student's Info
Adjusted Gross Income (AGI) (1040: line 37)	\$ _____	\$ _____
Earnings from Work (1040: Sum of line 7, 12, and 18, and Schedule K box 14)	parent 1 \$ _____	\$ _____
	parent 2 \$ _____	
Taxable Combat Pay included in AGI	\$ _____	\$ _____
Untaxed Income/Benefits	\$ _____	\$ _____

Include Child Support RECEIVED for all Children; Deductible IRA and/or Keogh payments; payments to tax-deferred pension; Untaxed portions of IRA distributions or pensions, excluding "rollovers"; Health savings account deduction; Housing, Food, & other living allowances (Do not include on-base housing or basic military housing allowances; Tax-exempt interest income; Non-education VA benefits; All other untaxed income

STUDENT NAME: _____ ID #: _____ BIRTH DATE: _____

INDEPENDENT STUDENT INFORMATION

Complete only if you did NOT answer "no" to ALL page 1 questions.

1. Student's Marital Status

Married Divorced Separated Widowed Single

2. Family Size Include

- Yourself, and your spouse if you have one
- Your children if you will provide more than half of their support from July 1, 2020, through June 30, 2021, even if they do not live with you
- Include other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2021.
- Include the name of the college for any household member who will be attending college at least half-time between July 1, 2020 and June 30, 2021, and will be enrolled in a degree, diploma, or certificate program.

First Name	Last Name	Age	Relationship to student (spouse, son, daughter, etc.)	If this person will attend college half-time or more in 2020-2021, print the name of the college	Will be enrolled in at least 6 credit hours? Yes or No
			SELF	WEATHERFORD COLLEGE	

3. Current Home State/Province of Student _____

FINANCES

Independent Student 2018 Income

Adjusted Gross Income (AGI) (1040: line 37) \$ _____

Earnings from Work (1040: Sum of line 7, 12, and 18, and Schedule K box 14) student \$ _____ spouse \$ _____

Taxable Combat Pay included in AGI \$ _____

Untaxed Income/Benefits \$ _____

Include Child Support RECEIVED for all Children; Deductible IRA and/or Keogh pymts; pymts to tax-deferred pension; Untaxed portions of IRA distributions or pensions, excluding "rollovers"; Health savings account deduction; Housing, Food, & other living allowances (Do not include on-base housing or basic military housing allowances; Tax-exempt interest income; Non-education VA benefits; All other untaxed income

STUDENT NAME: _____

ID #: _____

BIRTH DATE: _____

DEPENDENT AND INDEPENDENT STUDENT INFORMATION

Education Tax Credits

\$ _____

Receive federal means-tested benefits within the past 2 years (Supplemental Security Income Program {SSI}, Food Stamp Program, Free or Reduced Priced School Lunch Program, Temporary Assistance to Needy Families, Special Supplemental Nutrition Program for Women, Infants, & Children {WIC})

Yes No

Dislocated Worker

Yes No

Parent's Info if Dependent
Student's Info if Independent

Student's Info if Dependent
Spouses Info if Independent

Allowances

U.S Income Taxes Paid

\$ _____

\$ _____

Child Support PAID

\$ _____

\$ _____

Student Financial Aid

\$ _____

\$ _____

Include Earnings from Federal Work Study or other need-based programs; Earnings from work under a cooperative Education Program (co-op) offered by a college; Grand and Scholarship aid in excess of tuition, fees, and books, that was included in AGI; AmeriCorps awards – allowances & benefits

Assets

Cash, Savings & Checking

\$ _____

\$ _____

Other Real Estate & Investment Equity (but NOT the student's home)

\$ _____

\$ _____

Business Equity

\$ _____

\$ _____

Do you have more than 100 full-time employees?

Yes No

Farm Equity

\$ _____

\$ _____

If you own a farm, report the calculated equity (value minus debt). To determine the value of land, buildings, machinery, equipment, livestock, inventories, etc. Don't include the home if it is part of the farm. To determine the debt, include only the current pay-off amount of the mortgage and related debts for which the farm was used as collateral. If you are not the sole owner(s), enter only your share of the equity.

Do you live on the farm?

Yes No

LOAN INFORMATION

Have you, the student, ever had any student loans?

Yes No

SIGNATURES

By signing this worksheet, I/we certify that all the information reported on this form is complete and correct. Our signature(s) below authorize the process of determining eligibility for the Workforce Education Grant. I/we also understand that this form is NOT to determine eligibility of federal financial aid.

Warning: if you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature (required)

Date

Parent's Signature (required if Dependent)

Date