



## Education & Training Voucher Program - ETV

Central Plains Center for Services, through a contracted partnership with the Nebraska Children and Families Foundation, administers the Education and Training Voucher (ETV) Program. This program provides financial assistance for tuition, fees and books, as well as one-on-one support, for current and former state wards to attend college.

### Am I eligible?

Yes...if you have graduated from high school or obtained a GED and meet one of the following criteria:

- State or Tribal wards who are age 17 or older.
- Youth who were in the State or Tribe's custody and received guardianship or adopted status at the age of 16 or older and have yet to reach age 26.
- Youth who were in the State or Tribe's custody on their 17<sup>th</sup> birthday and are now between the ages of 17 and 26.
- Youth participating in the ETV Program are eligible until they turn 26 years old but may receive no more than 5 years of ETV financial assistance.
- ❖ Youth must be attending public or private four-year colleges or universities, two-year community colleges, vocational-technical schools or specialized non-profit trade schools as defined in the Higher Education Act of 1965.

### How can ETV help me?

You can receive up to \$2,000.00 per year (an individual shall not exceed the lesser of \$2,000.00 per year or the total cost of attendance).

**ETV funds can cover the following school related expenses:**

- **Tuition and Fees**
- **Books**
- **Application Fees**

### How do I apply?

You must complete an application and return it to us. Get an application at:

- Website: [www.central-plains.org](http://www.central-plains.org)
- Your local HHS Office
- By calling us at 308-872-6595

### How do I know if I have been accepted into the ETV Program?

- ❖ Once your application is received at our office, our Youth Education Specialists, Jessi Mason and Kris Hook, will contact you by phone to review the application as well as review with you the services ETV will be able to provide.
- ❖ For questions please contact Central Plains Center for Services at (308) 872-6595 or by email at [awhite@central-plains.org](mailto:awhite@central-plains.org).

# EDUCATION & TRAINING VOUCHER APPLICATION

## Part A- Applicant Information

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_ Student ID, if applicable \_\_\_\_\_

Birth Date \_\_\_\_\_ Telephone # \_\_\_\_\_

Current Address (both mailing and street) \_\_\_\_\_

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

Email Address \_\_\_\_\_

Date of dismissal from State's Custody \_\_\_\_\_ Age at time of dismissal \_\_\_\_\_

Or, if applicable: Date of expected dismissal from State's Custody \_\_\_\_\_

Tribal Ct. Jurisdiction at time of dismissal (if applicable) \_\_\_\_\_ Date of dismissal \_\_\_\_\_

Social Security # \_\_\_\_\_

### Required demographic information (current)

Age \_\_\_\_\_ Gender \_\_\_\_\_ Race/Ethnicity \_\_\_\_\_ Tribal Affiliation (if any) \_\_\_\_\_

Special Needs, please specify \_\_\_\_\_

Married? Yes, \_\_\_\_\_ No, \_\_\_\_\_ ; Are you a parent? Yes, \_\_\_\_\_ No, \_\_\_\_\_

If yes, how many children do you have? \_\_\_\_\_

If yes, is the child(ren) living with you? Yes \_\_\_\_\_ No \_\_\_\_\_

If not, are you paying support? Yes \_\_\_\_\_ No \_\_\_\_\_

### **A. PROTECTION AND SAFETY WORKER INFORMATION (IF APPLICABLE)**

P&S Worker: \_\_\_\_\_ Phone \_\_\_\_\_

Office Location (City) \_\_\_\_\_

For PSW: Please indicate what the youth's permanency and independent living plan is:

\_\_\_\_\_

PSW Signature: \_\_\_\_\_

By signing this Education and Training Voucher Application, I authorize the school I am attending to release all requested information to Central Plains Center For Services. In addition, I agree to comply with my outlined Education Plan and verify that the information in this application is accurate.

Applicants Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Education and Training Voucher Application Part B – Education and Training Plan

The purpose of this plan is to ensure that your educational needs are met. It is very important that as a participating youth, you have applied for admissions, been admitted, and have enrolled at your chosen school.

Please complete the following steps prior to applying for the Education and Training Voucher Program:

- ✓ Apply for admissions if necessary
- ✓ Complete admission testing if necessary
- ✓ Complete the Free Application for Federal Student Aid (FAFSA)
- ✓ Register for classes
- ✓ Gather billing statement for tuition and fee charges
- ✓ Gather book costs for classes (information available at campus bookstore or on college website)

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Please complete **Part A and C** of this application and return it to us with the following documents:

- Class schedule
- Bill for tuition and fees
- Exact cost of books needed for classes
- Financial aid award letter from the college; or FAFSA confirmation page

**Please submit your application and required documents to:**

**Fax: 308-872-6596**

**Email: [awhite@central-plains.org](mailto:awhite@central-plains.org)**

**Have questions? Please contact one of our Education Specialists:**

**Kris Hook**

[khook@central-plains.org](mailto:khook@central-plains.org)

402-698-1559

**Deena Gibson**

[dgibson@central-plains.org](mailto:dgibson@central-plains.org)

308-749-2580

# Education and Training Voucher Application | Part C – Questionnaire Form

You are not obligated to answer any of these questions. Your information is kept confidential and used to better understand students' experiences and backgrounds as they pursue college.

## CIRCLE WHERE APPROPRIATE:

- 1) College release of information completed (FERPA): Yes or No
- 2) Highest level of education (high school diploma, GED, some college-no degree, vocational certificate, associate degree, other): \_\_\_\_\_
- 3) Name of college and college major (if declared): \_\_\_\_\_
- 4) Desired date of college/school entrance? \_\_\_\_\_
- 5) College status for upcoming term: Part-time OR Full-time (FT is 12 or more credit hrs)
- 6) Are you a recipient of the following scholarships:
  - a. Susan Buffet Scholarship: Yes or No
  - b. Reaching Your Potential: Yes or No
  - c. Other scholarships over \$1000: \_\_\_\_\_
- 7) Born outside of US: Yes or No
- 8) Foster Care experience: Currently involved or Previously involved
- 9) Justice System involvement: Yes or No
  - a. If Yes, are you:
    - i. Currently involved (circle one): Juvenile OR Adult
    - ii. Previously involved (circle one): Juvenile OR Adult
- 10) Individualized Education Program (IEP or IFSP) in high school: Yes or No
- 11) Eligible for Bridge to Independence: Yes or No
  - a. Currently enrolled in B2I: Yes or No
  - b. Formerly enrolled in B2I: Yes or No N/A
- 12) Current living situation (Dorms, Own Apartment, Shared Housing with friend, living with family, couch surfing, homeless, etc.): \_\_\_\_\_
- 13) Have you ever been homeless: Yes or No
- 14) Ever had paid employment: Yes or No
- 15) Currently employed: Yes or No
  - a. If Yes, are you considered: Part-time OR Full-time (32 hrs or more/per wk)
- 16) Most recent wage: \_\_\_\_\_

I hereby grant permission for Central Plains Center for Services (CPCS) to share information collected on my ETV application with other partnering organizations to assist in **PROVIDING ME OR MY DEPENDENTS WITH SERVICES.** I also grant permission for Central Plains Center for Services to share information collected on my ETV application with Nebraska Children and Families Foundation (NCFF) **TO EVALUATE LEARN AND EARN TO ACHIEVE POTENTIAL (LEAP).** a grant source that supports programming and services I may receive as an ETV participant. I understand that my data will be kept confidential.

I agree to have my picture or image used with or without name for any lawful reason

Student Name: \_\_\_\_\_ Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

If under 19, have guardian sign:

Guardian Name: \_\_\_\_\_ Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**Once your application is received at our office, an Education Specialist will be in touch with you by phone within 2 days.**