



First Name:	Last Name:	Current Term:			
Student Id:	Phone #:	Last 4 digits of SS#:			
9	nded, Education and Training Voucher (E)	Date: /			
expenses. I authorize the Financial Aid Office to release my account information to the program:					
— — — MUST BE COMPLETED BY FINANCIAL AID OFFICE — — —					
ALL FIELDS TO BE COMPLETED FOR CURRENT TERM ONLY!					
Calendar System : ☐ Semester ☐ Trimester ☐ Quarter		School Name:			
Current Quarter or Term (check one):					
\square Fall \square Winter \square Spring \square Summer		Campus:			
Number of credit hours this term:					
Has student applied for FA	FSA (check one): ☐ <i>Yes</i> ☐ <i>No</i>	Cost of Attendance per term: \$* * As defined by the Higher Ed Act - tuition, fees, room, board, transportation, supplies, etc*			
Tuition/Fees per term: \$					
Does student live (check one) ☐ On Campus ☐ Off Campus — If on campus, housing cost: \$					
Does student have a meal plan? Yes No If yes, meal plan cost: \$\$					
Pell Grant Amount Received (per term):					
*If Pell is not available indicate why: 🔲 EFC too high 🔲 Academic Suspension 🔲 Ineligible why:					
Subsidized Loans (Check al	l that apply) \Box Offered \Box A	Accepted Declined \$			
Unsubsidized Loans (Check	all that apply) 🗌 Offered 🔲 🛭	(enter amount offered even if declined) Accepted ☐ Declined \$			
Perkins Loans (Check all tha	at apply) □ Offered □ A	(enter amount offered even if declined) Accepted ☐ Declined \$			
Grant/scholarships (current	term only):	(cinci anioani offered even if decimed)			
1.)		\$			
2.)		\$			
•		 \$			
Total amount owed to school after all aid has been applied:\$\$					
		me: Date/			
Direct Phone #: Email Address:					
PLEASE EAY FORM TO: 866-283-0223					

Please do not include a fax cover sheet Questions? Email: nc@statevoucher.org or Phone: 800-585-6112 www.fc2success.org www.fc2sprograms.org



Participation Agreement 2016-2017 Reach



As a participant in this program, you have responsibilities. Be sure to keep a copy of your NC REACH/ ETV forms and other information for your own records. Remember: Participating in one or both programs means you understand, agree, and will comply with all the following requirements:

<u>To 1</u>	receive NC REACH/ ETV funding:
	I must reapply every year after July 1 to be eligible for funding that school year: www.ncreach.org or <a< th=""></a<>
	I must complete the Free Application for Federal Student Aid (FAFSA) every year at www.fafsa.ed.gov . *PLEASE TRY TO COMPLETE AT LEAST TWO MONTHS BEFORE CLASSES BEGIN.
	If I do NOT receive an email from NC Reach/ ETV after completing my online application, my email address is not working. I must go to www.ncreach.org or www.fc2sprograms.org to 1. Log in using my Username and Password and 2. Fix my email address and anything else that needs to be updated.
	I have read the NC Reach/ ETV program information at www.ncreach.org or www.fc2sprograms.org and I understand the application process. The online application is Part 1, the Financial Aid Release form, budget form and signed participation agreement is Part 2, and if I am a returning student, the official transcript from my last NC Reach/ ETV funded semester is Part 3. Part 4 is talking with my coordinator.
	At the beginning of each term, I will fill out the top section of the Financial Aid Release Form and give it to my school's financial aid office to complete the rest & fax to NC Reach/ ETV. I will keep a completed copy for my records.
	It can take NC Reach/ETV 14 days to process my Financial Aid Release Form from the time the school faxes it.
Onc	e I have been funded by NC Reach/ ETV:
	I must communicate with my NC Reach/ ETV coordinator by phone at least once a month. IF I DO NOT STAY IN REGULAR COMMUNICATION, MY FUNDING MAY BE AFFECTED.
	I will meet in person with my NC Reach/ETV coordinator at least once a semester to discuss my plans, concerns, successes and academic progress. <i>IF I DO NOT MAKE A REASONABLE EFFORT TO MEET WITH MY COORDINATOR, MY FUNDING MAY BE AFFECTED.</i>
	I must have my own personal email address. I will check my email at least once a week for emails from NC Reach/ ETV and will reply as required.
	I must maintain a GPA of 2.0 or greater. If I fall below a 2.0 GPA in any semester/term, I will participate in the Academic Success Program. If I do not participate in this program, and fail to raise my GPA above a 2.0 the following semester/term, I may not be eligible to receive NC Reach/ ETV funding until I earn above a 2.0 and reapply.
	Before I withdraw from any class(es) or drop out of school, I will notify my NC Reach/ ETV coordinator by phone in order to remain eligible for future funding.
	To receive continued funding from NC Reach/ ETV, I will request that my registrar's office mail an <u>official</u> transcript of my grades at the end of each term to: 21351 Gentry Drive, Suite 130 Sterling, VA 20166 OR email an electronic copy to <u>nc@statevoucher.org</u> .
	I will update my NC REACH/ ETV profile immediately if ANY of my contact information (email, address, telephone, etc.) changes: www.ncreach.org or www.fc2sprograms.org
	NC Reach funds are available for four academic years only and will cease on my 26^{th} birthday. All ETV funding ceases on my 23^{rd} birthday.
Stu	dent Signature: Date:
	nted Name:

THIS DOCUMENT MUST BE FAXED TO: 1.866.283.0223 Questions? Email: nc@statevoucher.org or Phone: 1.800.585.6112

YOUR Budget - a Tool For Success						
This document is to be completed by the student						
Name: Date:						
Income	Per Month	Education Related Expenses	Per Semester			
Work	\$	Tuition and Fees	\$			
Other - IL Stipend, State aid	\$	Housing	\$			
Other - ex: child support	\$	Meal Plan	\$			
Total Income	\$	Books	\$			
Living Expenses	Per Month	Total School Expenses	\$			
Rent	\$	School Related Funding	Per Semester			
Child Care	\$	Pell Grant	\$			
Meal Plan	\$	Other Grants / Scholarships	\$			
Phone	\$	Student Loans	\$			
Cable / Internet	\$	Total Financial Aid \$				
Electric	\$					
Natural Gas	\$	ETV funding may be used to pay:				
Water	\$	-Tuition				
Dining out, Movies, Etc.	\$	-Outstanding school balance (current term only)				
Clothing	\$	-On-campus room and board or rent				
Groceries	\$	-Meal card or groceries				
Car Payment	\$	-Books and school supplies (such as uniforms, tools, equipment)				
Gas	\$	-One computer package (ETV only)				
Auto Insurance	\$	-Study abroad through qualifying schools				
Maintenance	\$	1				
Public Transpiration	\$	Once these expenses have been covered, funds may be used for other				
Personal Care	\$	expenses up to your school's published cost of attendance (COA)				
Health Insurance	\$	-Transportation				
Savings	\$	-Health insurance				
Other	\$	-Disability Service				
Total Living Expenses	\$	-Dependent child care expenses to licensed providers				
A budget is telling your money where to go instead of wondering where it went!						
Please note any financial or other worries you have regarding attending and succeeding in a postsecondary program:						
Reliable Transportation Daily organizational skills / Time management						
Affordable & Licensed Child Care Study Skills						
Stable and Affordable Housing Understanding how to succeed in college						
	Other (Please	pe specific)				

Please return complete form by fax to 866-283-0223 or email to faxnc@statevoucher.org



