

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF CHILD AND FAMILY SERVICES

ROSS E. ARMSTRONG
Administrator

Education and Training Voucher (ETV) Fact Sheet

What do I get?

Up to \$2,500 per semester!

This can cover the following school related expenses: *if* included in your schools cost of attendance

- Books
- Child Care Expenses
- Miscellaneous Personal Expenses
- Personal Computer & Supplies
- Student Loans (must be current year)
- School Supplies
- Transportation

How do I apply?

You can get the application at: The Children's Cabinet, Inc. 777 Sinclair Street Reno, NV 89501 Phone: 775-352-8090 Fax: 775-322-1007

1-866-741-3218

www.childrenscabinet.org

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http://dcfs.nv.gov/Programs/CWS/IL/ETV/
You **must also** apply for the FAFSA first:
http://www.fafsa.ed.gov

Am I eligible?

You are, if you meet the following requirements. You:

- ✓ Are in foster care, will age out of foster care or have aged out of foster care already;
- ✓ were adopted from foster care on or after your 16th birthday;
- ✓ attend, at least half-time, at an *accredited* school that (as defined by the institution):
 - awards a Bachelor's degree or not less than a 2-year program that provides credit towards a degree,
 - o provides no less than 1-year of training towards gainful employment, *or*
 - is a vocational program that provides training for gainful employment and has been in existence for at least two years;
- Maintain a GPA of 2.0 and/or make satisfactory progress in your educational goals.
- ✓ If you have moved to Nevada for the sole purpose of attending school, you must access ETV funds from your home state.

You may ONLY participate in the ETV program for 5 years MAX (whether or not the years are consecutive) at an *accredited* school or until your 26th birthday -whichever comes first.

When do I get the award?

- Applications will be processed on a rolling basis (first come, first served). After all of your application materials have been turned in and processed, you may receive an award letter. Please allow 30 days for the reviewing and processing of your application. Please contact Wendy Figueroa at Desk: 775-348-6785 Email: wfigueroa@childrenscabinet.org or by Text: 775-830-0397 to ensure receipt of your application and start the communication process.
- This award will be sent directly to your post-secondary school, your landlord, creditors, and if additional funds are available after your fees are paid, and you have documented the need for other school-related expenses, you may receive a monthly stipend to assist you in meeting your needs.

Application Form – Fall 2020 & Spring 2021

Please complete all lines and circle all choices that apply to you

NAME:						
GENDER: Male	Female	CURI	RENT AGE:		ETHNICITY	:
DATE OF BIRTH	I:			TELI	EPHONE: ()
CELL PHONE: ()			WOR	K PHONE: ()
E-MAIL ADDRE	SS:					
COUNTY of FOS	TER CARE CA	ASE:				
CURRENT PHYS (Street, city, state		ESS:				
MAILING ADDR (Street, city, state	AESS:and zip code)					
FAMILY COMPO	OSITION:	Single	Married	Living	g with significant	other
LIST NUMBER (OF CHILDREN	N IN HOME: _				
ARE YOU EMPL	OYED?	Yes	No			
ARE YOU RECE	IVING COUR	T JURISDICTI	ON STIPENDS	?	Yes	No
HOW DID YOU I	BECOME AWA	ARE OF THIS	PROGRAM?			
Caseworker F	Soster Parent	College/Univer	rsity/Vocational F	rogram	CASA	Other
SCHOOL INFOR	MATION:	Fall 2020	Spring 2021			
COLLEGE/VOC	ATIONAL PRO	OGRAM NAM	E:			
SCHOOL ADDRI (Street, city, state	ESS: and zip code)					
YEAR IN SCHOO	DL PROGRAM	I: 1 st	2^{nd} 3^{rd}	4^{th}	5 th	
MAJOR:						
I,	work toward and		YOUTH AGRE		ditions of the Edu	acational Training Voucher

2/21/2020

eligibility requirements for the Educational and Training Voucher Program funds. Further, I certify that all information is true

and correct to the best of my knowledge and I understand that providing false information or the misuse of funds will result in termination from this program. I understand The Children's Cabinet will be using HMIS/Clarity and/or any other internal program as their database and/or educational record keeping system.

Youth's Signature:	Date:
Caseworker Name:	Date:
Caseworker Email:	Phone: ()

Policy and Eligibility Requirements

(Checklist of documentation that must be submitted with this application)

Documentation of Eligibility:

ETV program eligibility extends to:

- > Those youth who were in foster care on or after their 18th birthday, or
- Those youth who were adopted from foster care on or after their 16th birthday.
- Youth who have been accepted to an *accredited* post-secondary or vocational school.
- Youth who agree to attend school *full-time* or *part-time*.

In order to receive funding, the institution that you attend must:

- ➤ Be legally authorized within the State to provide a program of education beyond secondary education;
- ➤ Provide an educational program where the institution awards a bachelor's degree *or* provides not less than a 2-year program that is acceptable for full credit toward such a degree, *or*
- > Provide an educational training program to prepare students for gainful employment in a recognized occupation; and
- > Be a public, private or other nonprofit institution.

The applicant must submit the following of	documents before the application can be approved:				
[Check when included]					
□ Proof of Eligibility, [letter from social w	orker or copy of court order releasing you from foster care]				
☐ Education Training Voucher Application					
☐ Letter of acceptance to school/program [if	f not yet registered for classes]				
☐ Copy of class schedule to ensure at least p	part-time enrollment				
☐ Copy of previous post-secondary school not include your high school transcri	transcripts to ensure passing grades [if applicable – this does ipts]				
☐ Copy of financial aid award letter docume	enting all financial aid received and financial need				
± •	ease of Information form submitted to school/program				
☐ Children's Cabinet Release of Information	1 0				
☐ Copy of student's "Court Jurisdiction" bu	dget (Post-18 Services Agreement budget)				
☐ Completed Student Budget Form					
☐ Copy of your current photo ID					
1.	Direct Deposit – (for stipends and/or reimbursements)				
	of the following to their school or program: [Check when				
1 5	telease sent to the financial aid office of your school/program				
The applicant must submit the following of [Check when included] [Federal Tax ID number 1]	documents if requesting aid for the following: mber not required if payee is a corporation]				
All documentation MUST include: amoun	t due, name of payee, address, phone number, and Federal				
Tax ID Number					
☐ Rent-Copy of Lease	☐ Loan Payments-Copy of bill or payment coupon				
☐ Child care—Statement from provider ☐ Utilities — ie: complete billing in student's name					
☐ Books—Printout from school bookstore ☐ Other—Call for instructions					

Academic and Financial Aid Release

School:		
(Print name of school or program you are attending)		
RE: Student ID:		
(Print your student ID)		
Student Login:	Student Passy	word:
I have completed the FAFSA (please circle one):	Yes	No
I have attached copy of the financial aid award let Yes No	ter from my schoo	of choice (please circle one):
To the Registrar and/or Financial Aid Office:		
I,(prin	t name) have applied	d for Federal/State funding towards my
school costs. In order to receive this funding, the	Education and Tra	ining Voucher (ETV) Program staff a
The Children's Cabinet, Inc. may need access to m	v academic and/or	financial aid information. If requested
I authorize you to send a copy of my Academic		-
•	•	
Education and Training Voucher (ETV) Program	•	ς .
academic and/or financial status to the ETV Pro		-
authorize and agree that The Children's Cabinet,	Inc. can release in	formation regarding my ETV funding
status and be set up as a third party on my student	center account.	
(Student Signature)		(Date)
Please circle one of the following and complete number of c	redits:	
I am a: full-time student (credits) / pa	rt-time student (credits)
Expiration Date:		
Expiration Date: * Expiration should meet the needs of the client from date	te of signature to Jur	ne 30 of 2021 (current school year)

The Children's Cabinet, Inc. 777 Sinclair Street

Reno, NV 89501

Phone: 775-352-8090 or 1-866-741-3218

Fax: 775-322-1007

The Children's Cabinet Release of Information

I,	ion and Training Voucher (ETV) Program staff at The or people to gather information to make direct payment at to exchange information with the agencies/people lister orize The Children's Cabinet, Inc. to release information at and I may not be able to control what happens to my nor agency, and that the agency or person getting my are it with others. I further understand The Research
(Student Signature)	(Date)
AGENCIES AUTHORIZED TO INFORMATION WITH THE CHILDR	
State of Nevada Division of Child and Family Ser	vices (DCFS).
Current or Former Child Welfare Agency (Clark C County Human Services Agency).	County Department of Family Services or Washoe
School / Program of Attendance.	
Contracted Independent Living Service Providers Court Jurisdiction funds (DCFS IL Service Provide	who may provide services using Chafee, FAFFY or ers, Step UP).
Any Vendor for the purposes of paying bills on yo company).	ur behalf (such as: landlord, utilities, student loan
An Emergency Contact Person in case of loss of of l	
Address:	
Phone Number:	
Relationship to Applicant:	
Information or records to be released and exchanged shall be Name ◆ Address ◆ Home & work phone numbers ◆ School attendance and academic progress ◆ Current academic standing ◆ FAFFY funds provided	
Expiration Date: *Expiration should meet the needs of the client from date of s	ignature to June 30 of 2021 (current school year).

Budget Form

Monthly Income:					
Wages from Employment:	\$				
Social Security Benefits:	\$				
Court Jurisdiction:	\$				
Other:	\$				
Sub-Total Income:	\$				
Financial Aid:	Financial Aid:				
Pell Grant:	\$				
Otto Huth Scholarship	\$				
Millennium:	\$				
Other Scholarships	\$				
Other:	\$				
Other:	\$				
Sub-Total FA:					
	\$				

Total Income:	\$		
Total Expenses	\$		
Shortage/Surplus:	\$		
ETV Request: Fall	\$		
ETV Request: Spring	\$		
ETV Request: Summer	\$		
Total Request*	\$		
*May not exceed \$5,000.00 pc	er school year		

FULIII	
Monthly Expenses:	
Housing:	
Rent:	\$
Utilities:	
Electric:	\$
Gas:	\$
Garbage	\$
Sewer & Water	\$
Telephone	\$
Cell Phone	\$
Internet	\$
Transportation:	
Bus Pass:	\$
Car Payment:	\$
Insurance:	\$
Gas:	\$
Registration/Repairs:	\$
Food:	
Groceries:	\$
School Meal Plan:	\$
School Expenses:	
Tuition and fees:	\$
Books:	\$
On Campus Parking Pass:	\$
Family Expenses:	
Child care:	\$
Child Support	\$
Personal Expenses:	
Clothes:	\$
Toiletries:	\$
Other grooming i.e. haircuts:	\$
Loans:	
Student Loans:	\$
Credit Card Payments:	\$
Personal Loans:	\$
Other:	\$
Entertainment:	
Cable TV/Videos/Movies:	\$
Hobbies/gym fees:	\$
Misc: pets, medical, etc.	\$
Savings:	\$
Total Monthly Expenses:	\$

ETV Financial Request Form

\$2,500 Fall 2020 Request

Please identify the school-related costs you are requesting for the upcoming school year. The following is a suggested list but not inclusive, so please identify the areas specific to YOUR needs. Make sure that if you are asking for \$2,500.00 then the total below should add up to \$2,500.00. Finally, you must **provide documentation for the expenses** (see checklist for required documentation).

Expense	\$ per month	Multiplied By	Number of Months (circle/check months for which you are requesting assistance)	=	Total Cost
Housing:		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Cell Phone:		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Power:		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Day Care		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Materials Supplies Computer		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Transportation (Bus/Vehicle)		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Cable/Internet:		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Personal Stipend:		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Loan: Specify		Multiplied By	July/August/Sept/Oct/ Nov/Dec	=	
Other: Specify		Multiplied By	July/August/Sept/Oct/ Nov/Dec	= Total	

^{**}Maximum benefit per applicant is \$5,000.00 per academic school year. The total benefit shall not exceed the total cost of attendance based on the financial award letter. The award will be sent directly to the required vendor. **Funds are dispersed as they are available. A request of \$5,000.00 does not guarantee an award of \$5,000.00.

ETV Financial Request Form

\$2,500 Spring 2021 Request

Please identify the school-related costs you are requesting for the upcoming school year. The following is a suggested list but not inclusive, so please identify the areas specific to YOUR needs. Make sure that if you are asking for \$2,500.00 then the total below should add up to \$2,500.00. Finally, you must **provide documentation for the expenses** (see checklist for required documentation).

			Number of Months		
Expense	\$ per month	Multiplied	(circle/check months for which	=	Total Cost
		By	you are requesting assistance)		
			Jan/Feb/March/April/		
Housing:		Multiplied	May/June	=	
		By			
			Jan/Feb/March/April/		
Cell Phone:		Multiplied	May/June	=	
		By	-		
			Jan/Feb/March/April/		
Power:		Multiplied	May/June	=	
		By	-		
			Jan/Feb/March/April/		
Day Care		Multiplied	May/June	=	
		By	-		
Materials					
Supplies		Multiplied	Jan/Feb/March/April/	=	
Computer		By	May/June		
			Jan/Feb/March/April/		
Transportation		Multiplied	May/June	=	
(Bus/Vehicle)		By	-		
			Jan/Feb/March/April/		
Cable/Internet:		Multiplied	May/June	=	
		By			
Personal		Multiplied	Jan/Feb/March/April/		
Stipend		By	May/June	=	
		Multiplied	Jan/Feb/March/April/		
Loan: Specify		By	May/June	=	
		Multiplied	Jan/Feb/March/April/		
Other: Specify		By	May/June	=	
				Total	

^{**}Maximum benefit per applicant is \$5,000.00 per academic school year. The total benefit shall not exceed the total cost of attendance based on the financial award letter. The award will be sent directly to the required vendor. **Funds are dispersed as they are available. A request of \$5,000.00 does not guarantee an award of \$5,000.00.

Tips to Ensure a Successful Application

- > Complete the application in its entirety.
- Apply for the PELL Grant early at http://www.fafsa.ed.gov
- Turn in everything as a package (if possible).
- ➤ Use the checklist to ensure you have enclosed everything.
- Contact ETV provider via phone, text, or email to ensure receipt of application.
- ➤ Utility bills must be provided MONTHLY to ensure proper payments.
- > Send the financial aid department of your school a copy of your financial aid release form.
- No "double-dipping." For example, do not request rent funds if you are receiving rental assistance from the Court Jurisdiction program, or through FAFFY funds or payments from a child welfare agency or contracted IL Service provider.
- > Send in class schedules as soon as registered.
- ➤ Once awarded funds: For Traditional semester schools/programs use the following guidelines:
 - o Fall Semester application/documentation due by July 1 for August disbursements.
 - Spring Semester documentation due by December 1 for January disbursements. (If you are on academic probation, your January funds may not be distributed until January 15th to verify GPA/Credit criteria)
 - o Summer Semester documentation due by May 1 for mid-end of May disbursements.
- Apply any time but allow 30 days for application review.
 - Note due to increasing applications ETV will carry a waitlist and there is NO guarantee you will be awarded funds.
- ➤ Apply for all scholarships for which you may be eligible.

The ETV award is based on your follow through with the required information as requested by the ETV Coordinator. You will need to:

- Maintain a minimum of part-time status while making satisfactory progress towards completing your course of study or training.
- > Send in your grades as soon as they are issued EACH semester.
- ➤ Be making progress towards your educational goals earning no less than a 2.0 GPA two semesters in a row or passing marks in a technical/vocational program or you may be discharged from the program.
- Academic probation status follows Pell grant guidelines (3 strikes you are out). ETV may assist with one semester to "get into good standing with Pell." If student still does not meet GPA requirements, then the student may be discharged from ETV.
- Notify ETV program immediately if you have any change in circumstance such as:
 - Needing to drop or change a class
 - o The vendor we pay changes
 - o If you need to change the way we award your scholarship

Call if you need anything.

Wendy Figueroa, ETV Program Coordinator at Desk: 775-348-6785

Email wfigueroa@childrenscabinet.org. Text: 775-830-0397

Or call Cynthia Carstairs, ETV Program Manager at Cell: 775-343-6938

Email: ccarstairs@childrenscabinet.org.

Additional Resources Available to Youth Pursuing College

Ever wonder how you were going to pay for college, or who can afford to go to college? This fact sheet will answer those questions and direct you to the right places for more information. College is affordable and available to YOU!

"Before you can make a dream come true, you must first have one." Ronald E. McNair Ph.D., 2nd African American Astronaut

- ✓ All students must complete the **Free Application for Federal Student Aid (FAFSA)**. Students can access online at http://www.fafsa.ed.gov or by calling the Federal Student Aid Information Center at 1-800-4-FED-AID. In order to receive loan money, the Pell grant for low-income students or other aid, the student **MUST** complete the FAFSA. You may complete this at any time but are encouraged to complete your application by February 15th for the Fall semester.
- ✓ **Tuition Waiver for Former Foster Youth**. Students who have graduated from a Nevada high school or passed the TASC, HiSET or GED, are under age 26, and were in foster care at the age of 14 years or older are eligible for their tuition fees waived. Students must complete the FAFSA and the application form available online here: http://dcfs.nv.gov/Programs/CWS/IL/Other Ed/.
- ✓ Casey Family Scholars Program provides scholarships which range from \$1,500.00 to \$6,000.00 per academic year for young people who are eligible. Check the OFA Web site at http://www.fc2success.org
- ✓ Otto A. Huth Scholarship/Community Foundation of Western Nevada for Nevada's aged out foster youth. Must see website for eligibility, attend school full-time in Nevada, and apply before April 15 every year.

http://dcfs.nv.gov/Programs/CWS/IL/Other Ed/

✓ Contact your local High School Counselor or College Financial Aid Office for additional Scholarship Opportunities and DON'T LIMIT YOURSELF!!!!

Other Websites to check out (these are just a few):

http://www.fc2success.org The Foster Care to Success Scholarship Program

http://www.nevadatreasurer.gov/GGMS/GGMS Home/ Nevada's Millennium Scholarship

https://nfpaonline.org/Scholarship National Foster Parent Association Scholarship

www.collegeanswer.com Sallie Mae College Answer

http://apps.collegeboard.com/cbsearch_ss/welcome.jsp Big Future by The College Board

www.collegefund.org American Indian College Fund

www.Collegescholarships.com CollegeScholarships.com

www.JackieRobinson.org The Jackie Robinson Foundation

https://scholarships.uncf.org/ UNCF Scholarships, Programs, Internships and Fellowships

https://walmart.org/what-we-do/strengthening-communities/associate-support WAL-MART

www.fastweb.com Fastweb

http://scholarshipopportunity.org/fastaid/ Fastaid

www.GoCollege.com Go College

www.Collegefunds.net Collegefunds.net

www.HSF.net Hispanic Scholarship Fund

www.Scholarships.com Scholarship.com

CASA Foundation in your area