



**WORKFORCE EDUCATION GRANT (WEG)
APPLICATION INSTRUCTIONS
2022-2023**

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: 4D Mapping; Bookkeeping & QuickBooks; Clinical Medical Assistant; Computer Aided Drafting & Design (CADD); Word and Excel Courses; Dental Assistant; Electrocardiography; Electronic Health Records Specialist; FAA part 107; Heating, Ventilation & Air Conditioning (HVAC); Heavy Equipment Operator; Industrial Maintenance Technician; Law Enforcement Academy; Logistics; Machining & CNC; Medical Administrative Assistant; Medication Aide; Nurse Aide; Patient Care Technician; Pharmacy Technician; Six Sigma Lean; and Welding.

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 (Weatherford Campus) or 940-626-3263 (Wise County Campus).

- ⇒ 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 2020 Tax return; if you are a dependent include your parent's 2020 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.**
- ⇒ 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 _____
 2020 Taxes _____

WORKFORCE EDUCATION GRANT APPLICATION 2022-2023

THIS APPLICATION IS FOR AID FOR WORKFORCE EDUCATION CLASSES ONLY!

***** Please attach a copy of 2020 income tax returns and/or benefit statements to this application. *****

NAME (please print) _____ Phone # _____
 SS# _____ Date of Birth _____ Current Age _____
 Email: _____
 Program of Study _____ Campus _____

STUDENT'S CURRENT STATUS

1. Students year of birth:

2. College grade level in the coming school year:
 Never attended College__ Previously attended college
3. Students marital status:
 Never married Married Separated Divorced Widowed
4. Do you have any dependent children?
 Yes No
5. Are you an orphan or ward of the court?
 Yes No
6. Are you an emancipated minor?
 Yes No
7. Are you homeless or at risk of being homeless?
 Yes No

If ALL answers are NO, then you are DEPENDENT and need to submit your parent's taxes. Otherwise, you are INDEPENDENT and will use your own taxes.

Student finances:

1. Students state of legal residence

2. Students taxable combat pay included in AGI: (*Combat or special pay that you received and it was taxable and included in your adjusted gross income. Not the untaxed combat pay reported in W-2, box 12, Code Q*)

3. Number of People in your household: (*Always include yourself, spouse if married and other family members that live with you for whom you provide over half their support*)

4. People in your household attending college while you are in college:(*always include yourself, and any other family member who will be enrolled at least half time*)

5. Students combined wages, salaries and tips from work: (*this is found on IRS form 1040, line 1, form 1040 schedule 1, lines 3 and 6 and schedule K-1 (form 1065), Box 14 (Code A)*)

6. Students adjusted gross income: (*this information is found on IRS form 1040, line 11*)

7. Students federal tax payment: (*this is found on IRS form 1040, line 22*)

8. Students untaxed income and benefits: (*this is income from TANF, SSI and child support*)

9. Students claimed education tax credits: (*this is found on IRS form 1040 Schedule 3, line 3*)

10. Students current amount in cash, savings, checking account, and investments:

11. Do you own a business:
Yes No
12. Do you own a farm:
Yes No
13. Total equity in real estate other than a home, business or farm:

14. Amount you paid in child support:

15. Does the student receive federal means tested benefits:
Yes No
16. Is the student a dislocated student:
Yes No

Dependent Household information

1. Your parent's marital status:
Married Separated Divorced Widowed
2. Your older parents' year of birth:

3. Your parents state of legal residence:

4. Number of siblings in your parent's household and their ages:

5. Your parents combined adjusted gross income:

6. Your parents' federal tax payment:

7. Work income from one parent:

8. Taxable combat pay included in AGI:

9. Educational tax credits your parents received:

10. Untaxed income, benefits, and retirement plan contributions by your parents:

11. Do your parents receive federal means tested benefits:
Yes No
12. Are your parents dislocated workers?
Yes No

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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 (Dependent)

Date

Spouse's Signature (Independent)

SELECTIVE SERVICE STATEMENT OF REGISTRATION STATUS

In accordance with Texas Education Code, Section 51.9095, male students must file a Selective Service Statement of Registration Status with their institution or other entity granting financial assistance. For more information about the Selective Service System, visit sss.gov.

Please mark **one** option below:

I was born female and not required to register.

I was born male and am under the age of 18 and not currently required to register.

I was born male and am **REGISTERED** with the Selective Service.

I was born male and am over the age of 18. I am not registered with Selective Service and I am not exempt from registration with Selective Services.

I was born male and am **EXEMPT** from registration because: (please briefly explain why you are exempt in the box below.)

I, , hereby certify that the Selective Service status statement provided above is true and accurate.

Student ID: Signature:

Date:

Complete and return with the WEG application to the Workforce Education Office.

Selective Service Statement of Registration Status

As of 9/28/2021