

# Financial Aid Release Form 2014-2015

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Current Term: \_\_\_\_\_

Student Id: \_\_\_\_\_ Phone #: \_\_\_\_\_ Last 4 digits of SS#: \_\_\_\_\_

Student Signature Release: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

I have applied for the federally-funded, Education and Training Voucher (ETV) Program for the current term to help meet my post-secondary expenses. I authorize the Financial Aid Office to release my account information to the program:

## Must be completed by Financial Aid Office

Calendar System : ☐ Semester ☐ Trimester ☐ Quarter

Current Quarter or Term (check one):

☐ Fall ☐ Winter ☐ Spring ☐ Summer

Number of credit hours this term: \_\_\_\_\_

Has student applied for FAFSA (check one): ☐ Yes ☐ No

Pell Grant Amount Received (per term): \$ \_\_\_\_\_

\*If Pell is not available indicate why: ☐ EFC too high

☐ Academic Suspension ☐ Ineligible why: \_\_\_\_\_

School Name: \_\_\_\_\_

Campus: \_\_\_\_\_

Cost of Attendance per term: \$ \_\_\_\_\_

\*As defined by the Higher Ed Act - tuition, fees, room, board, transportation, supplies, etc\*

Tuition/Fees per term: \$ \_\_\_\_\_

Subsidized Loans (check one): ☐ Offered ☐ Accepted ☐ Declined \$ \_\_\_\_\_

Unsubsidized Loans (check one): ☐ Offered ☐ Accepted ☐ Declined \$ \_\_\_\_\_

Total amount owed to school after all aid has been applied: \$ \_\_\_\_\_

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: \$ \_\_\_\_\_

### Other Grants/Scholarships ( current semester only):

Amount

1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____

Preparer's Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Direct Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

**PLEASE FAX FORM TO: 877-234-5025**

Questions? Email: [etvgrant@statevoucher.org](mailto:etvgrant@statevoucher.org) or Phone: 877-766-5025

[www.fc2success.org](http://www.fc2success.org)

[www.fc2sprograms.org](http://www.fc2sprograms.org)

# Participation Agreement 2014-2015

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

## **To receive ETV Funding:**

- ☐ I must reapply every year after July 1st to be eligible for funding that school year at [www.fc2sprograms.org](http://www.fc2sprograms.org)
- ☐ I must complete the Free Application for Federal Student Aid (FAFSA) every year at [www.fafsa.ed.gov](http://www.fafsa.ed.gov)  
**\*Please try to complete at least two months before classes start**
- ☐ If I did NOT receive an email from ETV after completing my online application, my email address is not working. Go to [www.fc2sprograms.org](http://www.fc2sprograms.org), 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 ETV program information at [www.fc2sprograms.org](http://www.fc2sprograms.org) and I understand that I've started a process; the online application is Part 1, the Financial Aid Release form is Part 2 and, if I am a returning student, the official transcript from my last ETV funded semester is Part 3.
- ☐ At the beginning of each term, I will fill out the top section of the Financial Aid Release Form, then give it to my school's financial aid office to complete the rest and fax to ETV.
- ☐ It can take ETV 14 days to process my Financial Aid Release Form from the time the school faxes it.
- ☐ I must receive ETV funding for the first time before my 21<sup>st</sup> birthday.

## **Once I have been Funded by ETV :**

- ☐ **I must communicate with my ETV Coordinator by phone at least once a month. *If I do not stay in regular communication, my funding may be affected.***
- ☐ I must have my own working email address. I will check my email at least once a week for emails from ETV and will reply as required.
- ☐ I must maintain a GPA of 2.0 or greater. If I fall below a 2.0 GPA two terms in a row, I may no longer be eligible to receive funding. I can regain my eligibility by earning 12 or more credits with a GPA of 2.0 or greater. At any time, the Academic Success Program will be available to students.
- ☐ Before I withdraw from any class(es) or drop out of school, I will notify my ETV Coordinator by phone in order to remain eligible for future funding.
- ☐ To receive continued funding from ETV, I will request that my registrar's office mail an official transcript of my grades at the end of each term to the address at the bottom of this page.
- ☐ I will update my ETV profile immediately if my situation (childbirth, employment, marriage) or ANY of my contact information (email, address, telephone, etc) changes at: [www.fc2sprograms.org](http://www.fc2sprograms.org)
- ☐ All ETV funding ceases upon my 23<sup>rd</sup> birthday.

**Questions? Phone 1.877.766.5025 Email: [etvgrant@statevoucher.org](mailto:etvgrant@statevoucher.org)**

***Please do not send this to ETV. Keep this for your records.***  
**The New York ETV Program is administered by Foster Care to Success**  
21351 Gentry Drive, Suite 130 ■ Sterling, VA 20166 ■ [www.fc2success.org](http://www.fc2success.org)

## YOUR Budget – a Tool For Success

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	\$
<i>Total</i>	\$	Books	\$
<b>LIVING EXPENSES</b>	<b>per month</b>	<i>Total school expenses</i>	\$
Rent	\$	<b>School Related Funding</b>	<b>per semester</b>
Child Care	\$	Pell Grant	\$
Food	\$	Other Grants/ Scholarships	\$
Electric	\$	Student Loans	\$
Natural Gas	\$	<i>Total financial aid</i>	\$
Water	\$	<p>ETV funding may be used to pay:</p> <ul style="list-style-type: none"> <li>- Tuition</li> <li>- Outstanding school balance</li> <li>- On-campus room and board or rent</li> <li>- Meal card or groceries</li> <li>- Books and school supplies (such as uniforms, tools, equipment)</li> <li>- One computer package (ETV only)</li> <li>- Study abroad through qualifying schools</li> </ul> <p>Once these expenses have been covered, funds maybe used for other expenses up to the Cost of Attendance (COA):</p> <ul style="list-style-type: none"> <li>- Transportation</li> <li>- Health insurance</li> <li>- Disability service</li> <li>- Dependent child care expenses to licensed providers</li> </ul>	
Phone	\$		
Cable/Internet	\$		
Gas	\$		
Auto Insurance	\$		
Car Payment	\$		
Maintenance	\$		
Bus Pass; Public Transportation	\$		
Dining out, movies, etc.	\$		
Personal Care	\$		
Health Insurance	\$		
Savings	\$		
Other	\$		
<i>Total Living Expenses</i>	\$		

A budget is only useful if you use it.

Please note any financial or other worries you have regarding attending and succeed in a postsecondary program:

- |   |  |
|---|--|
| <input type="checkbox"/> Reliable Transportation<br><input type="checkbox"/> Affordable & Licensed Child Care<br><input type="checkbox"/> Stable & Affordable Housing | <input type="checkbox"/> Daily Organizational Skills/Time Management<br><input type="checkbox"/> Study Skills<br><input type="checkbox"/> Understanding How to Succeed in College<br><input type="checkbox"/> Other (Please be specific) |
|---|--|

---



---



---

This document must be completed by the STUDENT and faxed to NY ETV (877) 234-5025