

Daycare Assistance Textbook Assistance

Navarro College Career Center Application for Textbook Loan and Daycare Assistance

Name _____
(please print)

ID# _____

Address _____

City _____ Zip _____

Phone _____
(home) (work)

Birth date _____

CAREER/TECHNICAL MAJOR (AAS DEGREE) _____

SEMESTER: Spring 2008 _____ Expected month and year of graduation _____

1. **Tax Year 2007 Total Household Income:** \$ _____ Supports how many people? _____

2. **Are you currently receiving services of funding from: (Please check ALL that apply)**

- | | | | |
|---|--|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> TANF | <input type="checkbox"/> Medicaid | <input type="checkbox"/> Food Stamps | <input type="checkbox"/> TWC |
| <input type="checkbox"/> TPEG | <input type="checkbox"/> SEOG | <input type="checkbox"/> DARS | <input type="checkbox"/> CCMS/CCS |
| <input type="checkbox"/> Texas Commission for the Blind | <input type="checkbox"/> Texas Commission for the Deaf & Hard of Hearing | | |

3. **Have you filled out a 2007-2008 FASFA (PELL Grant) application?** Yes _____ No _____

4. **Have you been awarded a PELL Grant?** Yes _____ No _____

If yes, how much per semester \$ _____

5. **Are you a new applicant for the Career Center Services?** Yes _____ No _____

6. **Marital Status:** single _____ married _____ separated _____ divorced _____ widowed _____

7. **Are you a United States citizen?** Yes _____ No _____

If not, have you been granted Permanent Resident Status? Yes _____ No _____

Card Number _____ (Please provide copy of card)

8. **Do you have a medical and/or learning disability?** Yes _____ No _____

If yes, please check which one(s) below:

- Emotional Learning
 Physical Alcohol/Drug Related

9. **Highest level of education completed:**

- 1 to 8 years GED
 9 to 11 years College (# of credit hours _____)
 High School (year graduated _____)

Other, explain _____

10. **Employment History (enter # of years in applicable category):**

_____ Homemaker (no work outside of home)

_____ Part-time, what type _____

_____ Full-time work, what type _____

11. **Current Email address** _____

Name of any person who will know how to contact you in an emergency:

_____ Phone Number _____
(Please Print)

Navarro College gives equal consideration to all applicants for admission, employment and participation in its programs and activities without regard to race, creed, color, national origin, gender, age, marital status, disability or veteran status.

The child care assistance and book loan programs are made possible through, and dependent upon, continued funding of the Carl D. Perkins Vocational Act and the Texas Higher Education Coordinating Board

******Applications will not be accepted without a copy of your class schedule and Degree Plan******

Daycare Recipients

Please read statement below carefully and have signature notarized

After you receive your daycare assistance award letter YOU MUST SCHEDULE AN APPOINTMENT WITH THE CAREER CENTER. Failure to attend the meeting can result in funding being reassigned to other students on the waiting list.

DEPENDENT CARE REQUEST FOR: (Limit of 2 children under the age of 12)

Child's name	Childs's SS#	Date of Birth	Age
_____	_____	_____	_____
_____	_____	_____	_____

Name of Daycare _____

Phone # _____

Address of Daycare Facility _____

City _____ County _____ State _____ Zip _____

STUDENT CERTIFICATION AND RELEASE OF INFORMATION

I certify that all information on this application is complete and accurate, and that I will be a **FULL-TIME STUDENT** in a **Career/Technical program**, or have been granted permission from the Career Center Director to be enrolled in less than twelve semester hours. I will provide any documentation necessary, including; proof of income, copy of official birth certificate(s) a copy of child's social security card(s), or any other items necessary to verify needed information. I understand that any discrepancies or inaccuracies may result in cancellation of services provided and/or requirement of repayment of funds. I hereby give the Career Center staff my permission to share any information concerning education funding and/or transition into employment with faculty, professional staff members, and/or sponsoring agency members. This permission is granted in order that I may be assisted as fully as possible. I understand that all other financial aid, including the PELL Grant and Federal Student Loan, is processed through the Navarro College Financial Aid office, with each student receiving a maximum allotment allowed for her/his own circumstances.

I am aware that services are contingent upon the level of grant funding, maintenance of full-time enrollment or agreed upon semester hours with a 2.0 Grade Point Average, completion of all Career Center requirements, and sufficient progress toward my major.

I have read the above carefully before signing and understand that the information given is for the grant year from September 1, 2007 to August 31, 2008.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of _____, (Year) _____.

(Student Signature) (Seal)

Signed, sealed, and delivered in the presence of:

NOTARY PUBLIC
My Commission Expires _____