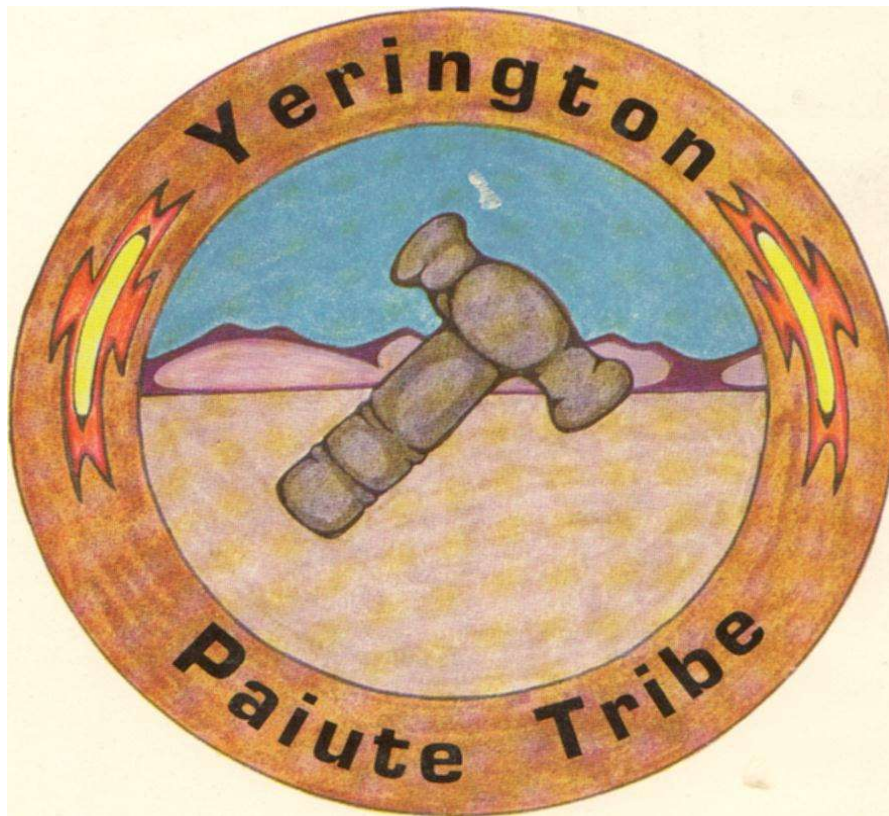


YERINGTON PAIUTE TRIBE

Adult Vocational Training Program



Program Policies and Application

Dear Adult Vocational Training Applicant:

The forms required for the Yerington Paiute Tribe Adult Vocational Training Grant application process are attached. The application deadlines are as follows:

Open Year Round

You are required to submit the following paperwork to complete the application process:

1. Adult Vocational Training Program Grant Application;
2. Name and information of vocational school (school accreditation), course work, costs, duration and school address;
3. Needs Analysis Form;
4. Proof of Yerington Paiute Tribal membership;
5. Copy of high school diploma, or GED certificate;
6. A copy of the Free Application for Federal Student Aid (FAFSA) verification form, if applicable.

You should not rely solely on the grant assistance from the Yerington Paiute Tribe. YPT AVT funds are very limited, and should be considered a supplement to your funding package. A WAITING LIST for grant assistance will be established if the number of grant applications and need exceed the funding available. You are strongly encouraged to seek other scholarships/grants to help offset the cost of vocational training. The Higher Education Counselor can assist you.

Keep in mind that applications for grants, scholarships, and even employment applications represent you. Many times the application is the first impression you make. To assist you in making a positive impression I've listed a few recommendations below:

You should read the entire document before you start to complete the application. Complete each application neatly, accurately, supply all the information requested of you and submit the application before the stated deadline dates. This is true even if you have completed the application year after year.

Type or use black ink to complete applications. Do not leave any question blank. Please do not state, "You already have that information." If the application should ask for addresses and telephone numbers, it is your responsibility to supply the information. Make the extra effort to secure the correct information. **READ AND CLARIFY ALL ITEMS BEFORE YOU SIGN ANY DOCUMENT.** Make a copy of each document, after it is completed, for your records.

If you need assistance during any portion of the application process, please contact the Education Director, (775) 463-3755 or leave a message at the Main Tribal Complex (775) 463-3301.

Good Luck in your educational endeavors!

Yerington Paiute Tribe Adult Vocational Training (AVT) Program

171 Campbell Lane

Yerington, Nevada 89447

(775) 463-3755 FAX: (775) 463-7892

E-mail address: www.educationdirector@ypt-nsn.gov

Dear AVT Grant Recipient:

One of the requirements of your YPT AVT award is providing the Education Director with your correct current mailing address, email and telephone number while at school.

Student Name (Print): _____

Mailing Address (While at school): _____

City/State/Zip: _____

Telephone Number: _____

E-mail address: _____

Signature

Date

Have a Great Learning Experience!

Approved by TC 12/5/2012

Revised 10/18/2012

Yerington Paiute Tribe Adult Vocational Training (AVT) Program

Education Program, 171 Campbell Lane, Yerington, Nevada 89447

Telephone Number: (775) 463-3755 FAX: (775) 463-7892

Application Due Dates: OPEN

Student's Full Name

Date of Birth

Social Security #

Physical Address

City

State

Zip

Cell/Telephone #

Email Address

Enrollment # _____ Enrollment Clerk's Initial of Verification _____

Occupational Goal: _____

Have you applied to a school? Yes _____ No _____ Have you been accepted? _____

It is a requirement of the Yerington Paiute Tribe AVT Program that every applicant completed and submit a Free Application for Federal Student Aid (FAFSA) form (if applicable). Have you completed the FAFSA and all other required financial aid paperwork for the school? _____. If not, please complete financial aid forms immediately.

VOCATIONAL SCHOOL INFORMATION

School Name: _____

Mailing Address: _____

City/State/Zip Code _____

Telephone Number: _____ Fax Number: _____

Date Classes Begin? _____ Length of Program? _____

I hereby certify that the information on this form is true and correct, and consent to the release of this information to the necessary programs in order to complete my application. I will use YPT funds for the sole purpose of school related expenses only. I will keep in contact with the YPT Education Director in order to provide updated information throughout the year.

Applicant Signature

Date

Approved by TC 12/5/2012
Revised 10/18/2012

Yerington Paiute Tribe Adult Vocation Training (AVT) Program

Attention: Education Director
171 Campbell Lane, Yerington NV 89447
(775) 463-3755 Fax (775) 463-7892

Student's Name (Printed): _____ Social Security # _____

I am living: (Check One) On Campus _____ off Campus _____ with Parents _____

My signature authorizes the Financial Aid Officer to release the information listed below.

Student's Signature

Date

NEEDS ANALYSIS

This Section to Be Completed By the Financial Aid Officer

This student has applied for a Yerington Paiute Tribe (YPT) Adult Vocational Training Grant. Verified financial aid information is necessary from your office before the YPT can complete this student's application. Thank you for your assistance.

Budget Period: From _____ Through _____

Does your office have a current FAFSA report for this student? Yes _____ No _____

This student is considered to be: (Circle One) Independent Dependent

TOTAL SCHOOL EXPENSES

Tuition and fees _____

Books and supplies _____

Housing/Dorm _____

Personal expenses _____

Transportation _____

Misc. costs _____

STUDENT RESOURCES

Student/Parent Contribution _____

Veteran's Benefits/GI Bill _____

Social Security _____

Vocational Rehabilitation _____

Welfare _____

Loans _____

Work Study _____

Scholarships _____

Total School Expenses _____

Total Resources _____

TOTAL UNMET NEED: _____

Financial Aid Officer: _____ Date: _____

Name of School: _____

Mailing Address: _____

Telephone Number: _____ FAX: _____

Please mail this form to the address listed at the top of this page.