1130 – Women's Resource/Returning Adult Program
Lansing Community College
P. O. Box 40010
Lansing, Michigan 48901-7210
Phone: (517) 483-1199 Fax: (517) 483-9645
http://www.lcc.edu/wrc

COMBINED TUITION GRANT APPLICATION
Single Parent, Displaced Homemaker, Non-traditional Career, and Special Populations Grant, and Women's Resource Foundation Grant
SPRING 2016, SUMMER 2016

SINGLE PARENT, DISPLACED HOMEMAKER, NON-TRADITIONAL CAREER, and SPECIAL POPULATIONS GRANT (SPops Grant)

This grant provides assistance with tuition and course fees, registration fees and facility fees to eligible students.

You may be eligible for the SPops Grant if you are pursuing an occupational program and fit into one or more of the categories below.

A SINGLE PREGNANT WOMAN
A SINGLE PARENT
A HOMEMAKER
A DISPLACED HOMEMAKER
A NON-TRADITIONAL CAREER TRAINEE
AN INDIVIDUAL with LIMITED ENGLISH PROFICIENCY
AN INDIVIDUAL with A DISABILITY
ECONOMICALLY DISADVANTAGED
***Definitions on page B**

- You do not need a high school diploma or a GED to be eligible for this grant.
- Those with a Bachelor's degree or higher are not eligible for this grant. Those with an occupational, vocational, or technical associate degree may also be ineligible.
- Students pursuing a General Associate degree are not eligible for this grant.
- Transfer Programs are not eligible for this grant but may be eligible on the WR grant.
- **You must meet the income guidelines.**
- **You must submit a complete application by the deadline date.**

WOMEN'S RESOURCE FOUNDATION GRANT (WR Grant)

You may be eligible for the WR Foundation Grant if you are an individual whose education has been interrupted and whose high school class graduated six years ago or more.

- This Grant is designed to assist students in obtaining their educational/occupational goal. Eligible courses include those taken toward a certificate or an associate degree, job-oriented courses, those taken for transfer, and student development courses
- You do not need a high school diploma or a GED to be eligible for this grant.
- Applicants must **not** have attempted more than **70 semester credits** from any college or university. Special consideration may be given to a student who is in her/his final two semesters or enrolled in a curriculum that requires more than 70 credits.
- Grant recipients must be willing to allow their residency status (in or out of district, etc.), courses taken, grades, completion of certificate or degree and the amount of grant awarded be made available to those donors requiring this information for their records.
- Students pursuing a General Associate degree are not eligible for this grant.
- **You must meet the income guidelines.**
- **You must submit a complete application by the deadline date.**

INCOME GUIDELINES

The student's family gross income must not exceed:

$19,000 self with no dependents
$25,000 self with one dependent
$27,000 self with two dependents
$29,000 self with three dependents
$31,000 self with four dependents

Add $2,000 for each additional dependent. If married, the spouse should be counted as a dependent.

FINAL APPLICATION DEADLINES

FALL SEMESTER	**JUNE 15**
SPRING SEMESTER	**NOVEMBER 15**
SUMMER SESSION	**APRIL 15**

IT IS TO YOUR ADVANTAGE TO TURN IN YOUR APPLICATION AS SOON AS POSSIBLE.

The Women's Resource/Returning Adult Program (WR/RAP) facilitates individual's economic self-sufficiency by helping them return to school, set goals, develop skills, and achieve academic success.

This is an application for **The SPops Grant**, and **The WR Foundation Grant**. These grants are resources that can help pay for basic academic costs (tuition and fees) that are not being paid for by other sources.

A separate application and documentation is required for the **WR/RAP Child Care Grant**. The Child Care Grant helps cover the cost of child care during the hours the student is in class and the child is attending a state-licensed child care provider.

Important Definitions

- **Career Assessment:** An exploration of career choices either through an online assessment or a meeting with a Career Counselor.
- **Course Approval Appointment:** A meeting with a WR/RAP administrator to approve course selection and funding eligibility.
- **Curriculum:** A student's intended academic path.
- **Displaced Homemaker**: A homemaker for at least 5 years, unemployed or underemployed who (1) has been dependent on the income of a relative but is no longer supported by such income, or (2) because of divorce, separation, or the death or disability of a spouse must prepare for paid employment or (3) has been receiving public assistance.
- **Economically Disadvantaged:** Individuals who meet the grant income guidelines who are from economically disadvantaged families, including foster children, Pell grant or other need-based financial assistance recipients, or migrants.
- **FAFSA-Free Application for Federal Student Aid:** An online federal application for student grants and low-interest loans. All students applying for the SPops and WR grants must file their FAFSA and get an answer.
- **Homemaker:** An adult who has worked primarily without pay to care for the home AND family for a minimum of 5 years, has diminished marketable skills, and is unemployed or underemployed.
- **Individuals with a Disability:** A person who has a physical or mental impairment that substantially limits one or more major life activities (Verified by the Center for Student Access, 483-1924).
- **Individuals with Limited English Proficiency:** An adult who has limited ability in speaking, reading, writing, or understanding the English language, and whose native language is a language other than English. (Verified by the Limited English Proficiency Program, 483-1924)
- **Non-Traditional Career Trainee:** A woman or man who wishes to prepare for employment in an occupation which traditionally has been underrepresented by his/her gender.
- **Single Parent:** A parent who (1) is unmarried (i.e., divorced, widowed, or never married) or separated from a spouse <u>and</u> (2) has a minor child or children for which the parent has either custody or joint custody.
- **Single Pregnant Woman:** An unmarried woman who is expecting the birth of a child. Documentation from a physician is required.

The Woman's Resource Foundation grant is made possible through contributions from individual community members and organizations, including Capital Region Community Foundation, Zonta Club of Michigan Capital Area, and Zonta Club of Lansing.

The Single Parent, Displaced Homemaker, Non-traditional Career, and Special Populations Grant funds are made available through a grant from the Michigan Workforce Development Agency, Community College Services.

Lansing Community College does not discriminate on the basis of race, religion, age, national origin, sex, marital status, color, height, weight, handicap or sexual orientation in its employment, educational programs or activities. If you feel you have been discriminated against, contact the Human Resources Department at (517) 483-1673.

POLICIES pertaining to both the SPops Grant and WR Grant.

1. These grants may be received more than one semester in an academic year as long as funds permit, eligibility criteria and income guidelines are met, and the student makes satisfactory academic progress in accordance with scholarship policies. Students must also maintain a satisfactory completion rate of credits attempted.

2. In determining eligibility, your previous academic record will be reviewed. If you have had academic difficulties in the past, you will be limited in the number of courses or the kind of courses we approve for you.

3. If we limit the number of credits a student may take due to academic record, the student may only take approved courses to receive <u>any</u> funding assistance from these grants (regardless of other financial aid eligibility).

4. **No classes can be taken on an audit basis. If a student later changes a course approved for credit to an audit, the student will be billed for the tuition and fees for that course.**

5. **SKILLS ASSESSMENT (Reading and Writing).** Before receiving tuition assistance, you must complete skill level assessments in the LCC Assessment Center. Call (517) 267-5500 for information. The results of these assessments aid us in advising students into appropriate courses and will <u>not</u> necessarily prevent you from attending Lansing Community College or from receiving these grants. A **CAREER ASSESSMENT** is required and instructions on how to complete the Career Assessment will be emailed to you if you are determined eligible for these grants. **Results of your career assessment must be brought to the WR/RAP office by the due date.**

6. The student is responsible for the cost of books and supplies for approved courses.

7. Dropping a class after the end of the 100% refund period results in a loss of tuition money from these grant funds. **THEREFORE, IF A STUDENT DROPS ONE OR MORE CLASSES AFTER THIS, IT MAY RESULT IN THE STUDENT'S INELIGIBILITY IN LATER SEMESTERS.** If you find it necessary to drop a class, you must do so formally through the Enrollment Services Office. **<u>Never simply stop attending class as it will result in a failing grade.</u>**

8. **TUITION AND COURSE FEES FOR APPROVED COURSES WILL BE PAID AS FUNDS ALLOW.** The WR/RAP staff is available by appointment to advise and promote the success of students on this program. Call 483-1199 or 1-800-644-4522 ext. 1199 for appointment times. Evening appointments are available if requested. **NOTE THAT GRANTS ARE BASED ON THE AVAILABILITY OF FUNDS.** In accordance with Federal guidelines, those with greatest need will be given priority for scholarships. If funds are limited, priority will be given in the following order: to single parents, displaced homemakers, non-traditional career trainees and then all other categories. All "eligible" applicants may not be served if funds are expended.

9. **NO CASH IS AWARDED.** The grant will be made for the exact number of credits approved, depending upon the availability of funds. Not all classes are eligible. Therefore, **requested classes must be approved by a WR/RAP staff member**.

10. All other grants, scholarships, and waivers must be used before these grants to pay for tuition and fees before either the SPops or WR grant is applied.

11. **<u>ALL PARTICIPANTS ARE REQUIRED TO APPLY FOR THE PELL GRANT AND RECEIVE AN ANSWER before getting assistance</u>. ALL TO-DO items--including Verification requirement--*MUST* be completed.** To apply for Pell you must complete and submit the 2015-2016 Free Application for Federal Student Aid (FAFSA) immediately. FAFSAs are submitted online at (http://www.fafsa.ed.gov). If you need assistance in completing the application, stop by Enrollment Services. If you are ineligible for Pell or in default on a student loan, you may still be eligible for our grant.

12. All new LCC students must sign-up for a REQUIRED LCC orientation by calling 517-483-1957 or registering online at www.lcc.edu/orientation.

13. **All Participants must sign-up for a payment plan after registering for classes. The majority of students who apply for these grants will be eligible for the "pending aid" payment plan. Check plan options online or with the Financial Aid office.**

APPLICATION PROCESS

THIS APPLICATION MUST BE COMPLETELY FILLED OUT AND ALL NECESSARY DOCUMENTATION ATTACHED BY THE DEADLINE.

DEADLINES:

FALL Semester	June 15
SPRING Semester	November 15
SUMMER Session	April 15

If the deadline falls on the weekend, applications will be accepted the following Monday until closing.

1. **The application must be complete, with ALL questions answered, and submitted to the WR/RAP with all current proof of income, custody, etc. attached by the deadline date in order to be processed.** Call (517) 483-1924 as closing hours vary.

2. We cannot guarantee eligibility determination in time for the start of Registration.

3. Students must apply for this grant each academic year.

4. We recommend that applications not be mailed. We do not take responsibility for applications which are late or lost.

5. Contact our office if you have not received notice about your eligibility two weeks after the semester application deadline.

6. If you are eligible, **you must have an appointment with a WR/RAP staff member to have your courses approved.** You must make this appointment by the deadline date indicated in the eligibility letter or your grant will be cancelled. This grant will not pay for tuition and fees until all requirements are complete as explained in a Course Approval Appointment with a WR/RAP staff member.

7. Each semester you will receive a letter notifying you whether or not you appear eligible for this grant and which outlines important deadlines and procedures for your Course Approval Appointment.

8. PLEASE NOTE: We may need to call you with questions related to your application. Due to confidentiality, we will not identify ourselves as the WR/RAP staff to whomever may answer your phone or on your answering machine. The staff member will say they are calling from LCC and leave their name and phone number. Please indicate on the front page of the application if we should not call you.

9. If you have any changes in your contact information, such as name, phone number, address, or email address, please notify our office by calling 517-483-1199 or submit your changes online on our website www.lcc.edu/wrc.

10. **TO APPLY FOR THE CHILD CARE GRANT, A SEPARATE APPLICATION IS NECESSARY.** You must attach proofs of income and custody to the Child Care application each time you apply, and you must use **STATE-LICENSED CHILD CARE**.

SPRING 2016, SUMMER 2016
APPLICATION FOR
SINGLE PARENT, DISPLACED HOMEMAKER,
NON-TRADITIONAL CAREER and SPECIAL POPULATIONS GRANT
AND
WOMEN'S RESOURCE FOUNDATION GRANT

NAME:_____

PREVIOUS NAME AT LCC:_____

ADDRESS:_____

CITY:_____ZIP:_____

PHONE HOME: (_____)_____-_____
□ check box if we should **NOT** call

WORK: (_____)_____-_____
□ check box if we should **NOT** call

EMAIL ADDRESS: _____

SOCIAL SECURITY #:_____

STUDENT NUMBER: _____

CURRICULUM/PROGRAM : _____

DATE OF BIRTH: _____
*If under age 24 with no dependents you must provide documentation of parent's sources of income.

ARE YOU A U.S. CITIZEN?_____
*If not a U.S. citizen, see page 6 for required documentation.

HAVE YOU APPLIED FOR THIS GRANT BEFORE?_____

In order to determine possible eligibility for tuition assistance, please answer the following questions. The information collected will be used only for this purpose and is considered confidential.

CHECK ALL THAT APPLY.

_____1. **SINGLE PREGNANT WOMAN: Documentation required.**

_____2. **SINGLE PARENT**

_____3. **HOMEMAKER:** ***Indicate number of years as a homemaker _____.***

_____4. **DISPLACED HOMEMAKER:** ***Indicate number of years as a homemaker _____.***

_____5. **NON-TRADITIONAL CAREER TRAINEE:** ***MUST DECLARE THE CURRICULUM NAME AND CODE NUMBER OF A NON-TRADITIONAL VOCATIONAL PROGRAM and indicate above.***
□ **FEMALE** □ **MALE**

_____6. **INDIVIDUALS with LIMITED ENGLISH PROFICIENCY:** (Verified by the Limited English Proficiency Program, 483-1924.)

_____7. **INDIVIDUALS with a DISABILITY:** (Verified by the Center for Student Access, 483-1924.)

_____8. **ECONOMICALLY DISADVANTAGED: Individuals who meet the grant income guidelines or are eligible for need-based financial aid.**

Please attach any additional information which would be helpful to us in determining your eligibility.

THIS APPLICATION MUST BE COMPLETE AND ALL NECESSARY DOCUMENTATION ATTACHED BY THE DEADLINE.

Are you a student with special needs? Yes_____ No_____
If yes, special services are available through the Center for Student Access (483-1924) and the Limited English Proficiency Program (483-1924).

You should have received any necessary academic advising from your department, college advisor or counselor, a staff member of the WR/RAP, Center for Student Access, LEP Program, or TIP Program **prior** to having your classes approved.

INDICATE MARITAL STATUS:

□ Single/never married □ Divorced □ Married □ Widowed □ Separated

DOCUMENTATION REQUIRED!

PLEASE LIST ALL DEPENDENTS: If you are married and living in the same home, list spouse. You must provide either Child's Medicaid card, court ordered custody papers **OR** any **TWO** pieces of documentation from the examples below for each dependent child.

Divorce Papers	Immunization Record
Child Support Documentation	School Record
WIC booklet showing child's name	Birth Certificate
DHS assistance showing child's name	Social Security card

Spouse's name:

_____

List Children's names and date of birth

_____

_____

_____

_____

DOCUMENTATION REQUIRED!

CHECK ALL SOURCES OF INCOME. INDICATE DOLLAR AMOUNT AND IF INCOME IS WEEKLY, BI-WEEKLY, OR MONTHLY. YOU MUST ATTACH CURRENT PROOF OF INCOME FOR **EACH** SOURCE YOU RECEIVE. **Income tax forms are not acceptable**. **Report gross income (before taxes).**

___Applicant's employment $ _____ (circle one: weekly/bi-weekly/monthly)
Must provide copies of recent check stubs.

___Spouse's income $ _____ (circle one: weekly/bi-weekly/monthly)
Must provide copies of recent check stubs.

___Child support received $ _____ (circle one: weekly/bi-weekly/monthly)
Must provide recent check stubs, account summary, or court order, or bank statement indicating child support deposit.

___Alimony received $ _____ (circle one: weekly/bi-weekly/monthly)
Must provide recent check stubs, account summary, or court order, or bank statement indicating alimony support deposit.

___Food Assistance $ _____
Must provide copy of EBT/Bridge card or a letter from DHS detailing eligibility, or a statement from your online account.

___ DHS Cash Assistance $ _____
Must provide letter from DHS detailing amount of cash benefit or a statement from your online account.

___ Medicaid
Must provide copy of Medicaid cards or letter from DHS detailing eligibility.

___ Social Security $ _____
Must provide letter from Social Security Administration detailing amount receiving or recent check stub.

___ Unemployment compensation $ _____
Must provide letter from Unemployment Agency detailing amount received and weeks of benefits.

___ Family/friend's assistance.
Must provide letter from family/friend (include name, current date, name of student being assisted, description of assistance and signed).

___ Housing/Public/Section 8 Subsidy
Must provide documentation detailing rental amount either from the Housing Commission or your landlord.

___ Other $ _____ Describe:_____
Examples may include student loans, tax refunds, in-home business, etc.

ALL STUDENTS MUST APPLY FOR THE 2015-2016 PELL GRANT AND RECEIVE AN ANSWER.

_____ I have applied for the 2015-2016 Pell Grant (Federal Financial Student Aid, FAFSA).

Date applied:_____

Are you in default on a student loan? Yes _____ No _____

If you are ineligible for Pell or in default on a student loan you may still be eligible for this grant.
You must apply for Federal Financial Aid (Pell) and get an answer. ALL TO-DO items--including Verification requirement--***MUST*** be completed

Are you presently receiving or eligible for any other educational assistance? Yes___ No___

If yes, explain: PELL Grant:_____ TRIO_____

Tuition Grant:_____ Employer Reimbursement:_____

MI Works!: _____ Work First: _____ Other_____

If receiving help from the Department of Human Services, (DHS) how long have you received assistance?

Years: _____ Dates: _____

If not currently on DHS, have you received it in the past? YES ____ NO ____

If yes, Number of years: _____ Dates:_____

Are you on the Work First Program or will you be eligible during this semester?

YES_____ NO _____

Educational level: Check all that apply:

_____1. High School graduate or GED completion? Month_____ Year _____

_____2. Some high school. If you do not have a high school diploma or GED, when did your high school class graduate? Month_____ Year_____

_____3. Have you had any education or training past high school? Yes___ No___

_____4. Name of colleges attended:_____
Dates:_____ Number of credits earned:_____

_____5. Associate degree/college attended/date received:_____
Degree title:_____

_____6. Bachelor's degree/college attended/date received:_____
Degree title:_____

_____7. Master's degree/college attended/date received:_____
Degree title:_____

_____8. Vocational training/school/date:_____

_____9. Total number of college credits. Attempted _____ Earned _____

_____10. Are you currently enrolled in any other college? Name:_____
Name of major/curriculum/program/degree:_____

EMPLOYMENT: Applicant must lack the job skills necessary to provide adequate financial support for self and dependents (if any).

Are you presently employed? Yes__ No__ Do you receive paid benefits? Yes__ No__

Medical? Yes__ No__ Sick Leave? Yes__ No__ Vacation? Yes__ No__

EMPLOYMENT:
List current (**or if unemployed, most recent**) employment first. This **must** be filled out.

Job Title: _____ Hours per week: _____

Employer Name: _____

Salary: Hourly rate $ _____ or gross: **weekly/bi-weekly/monthly**: $ _____
(circle frequency of pay)
Starting and ending dates: _____

Job Title: _____ Hours per week: _____

Employer Name: _____

Salary: Hourly rate $ _____ or gross **weekly/bi-weekly/monthly**: $ _____
(circle frequency of pay)
Starting and ending dates: _____

What other job skills do you have? _____

_____

Are there any special health-related reasons or other circumstances which prevent the use of these skills?

_____

STATEMENT OF PURPOSE

What are your reasons for wanting to attend college? Do you have immediate and/or long range goals for which education at LCC is necessary? Please describe:

_____

_____

_____

_____

_____

_____

If you are not a US citizen you must provide documentation showing you are designated one of the following; U.S. national (includes natives of American Samoa or Swain's Island), U.S. permanent resident, Refugee with an Arrival-Departure Record, Asylum Granted, Indefinite Parole and/or Humanitarian Parole, Cuban-Haitian Entrant, Conditional Entrant (valid only if issued before April 1, 1980).

If you are under the age of 24, unmarried and with no dependents you are still considered a dependent of your parents and must provide documentation of family income. If you want to be considered an independent student, you must provide us with proof that your parent(s) did not declare you as a dependent on their income tax in 2014 and are not declaring you this year (2015) **and** you must have proof that you have applied for Federal Financial Aid and be determined "Independent by Professional Judgment."

Please sign below to verify that you agree to the conditions and responsibilities of these awards and that you assume responsibility for knowing Lansing Community College policies.

I am returning to school and am seeking services and financial aid through the Women's Resource/Returning Adult Program (WR/RAP), Lansing Community College.

If I am eligible for the **Single Parent, Displaced Homemaker, Non-Traditional Career, and Special Populations Grant (SPops Grant)**, I understand that this grant provides funding for occupational education students only and that this grant is for students who are pursuing or have intent and commitment to pursue an occupational curriculum.

If I am awarded tuition assistance from the **Women's Resource Foundation Grant (WR Grant)**, I authorize the WR/RAP at Lansing Community College to provide to the donors the amount of my award, my residency status, the specific courses, grades, completion of certificate or degree and the number of credits which were paid for by this grant. No identifying information (such as name, address, student number, etc.) will be released.

I certify that all of the information supplied in this application is accurate to the best of my knowledge. I understand that failure to answer truthfully, providing invalid or incomplete income information or documentation, or being in non-compliance with program requirements may make me ineligible or financially responsible for tuition and fee payments made on my behalf by the State of Michigan or donors to the **WR Grant**. I also understand that I must reside in the State of Michigan to receive this funding.

In addition, I give permission to the WR/RAP at Lansing Community College to have access to my enrollment records, skill level scores, academic progress and grade information. I understand that grants are based on need. If I receive the Pell grant or other grants, I might not receive tuition assistance from these grants.

I understand that if this application is not completely filled out with income proof and custody documentation attached by the deadline, I will be ineligible. Completed applications must be returned to the WR/RAP by the semester deadline for eligibility determination.

I understand that funds for the **SPops Grant** and the **WR Grant** are limited and may not be available in subsequent semesters.

Applicant's Signature: _____ Date:_____

Drop off application to:

LANSING COMMUNITY COLLEGE
Campus Resources
Gannon Building
Lansing MI 48933

OR

Mail Application to:

WR/RAP - 1130
Lansing Community College
P.O. Box 40010
Lansing, MI 48901-7210
Call to verify receipt

OR

Fax applications to:

WR/RAP
517-483-9645
Include your full name.
Call to verify receipt.