

INCOME WORKSHEET FOR FANTIC FINANCIAL ASSISTANCE

Please Print in Ink.

MECC EMPLID #							
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Name: First _____ Middle Initial _____ Last _____

Number of family members: ___ Yourself ___ Children ___ Spouse/Domestic Partner

Have you ever received noncredit financial aid from Mountain Empire Community College? Yes No

Most Recent Tax Return	(Estimated) Income For Upcoming Tax Year
Total Family Income \$ _____ (The amount of wages on your W2 form if you filed taxes)	Total Family Wages \$ _____ Unemployment Income \$ _____ Child Support/Alimony \$ _____ Rental Assistance \$ _____ Food Stamps \$ _____ Temporary Cash Assistance \$ _____ Other Income \$ _____ *Est. Total Family Income \$ _____ <i>*If you are claimed as a dependent by a parent(s) or anyone else, you must include</i>

I WANT TO REGISTER FOR THE FOLLOWING COURSE(S):

Course Number	Course Title	Start Date	Tuition
Sample BUSC 2505	Starting Your Own Business	04/30/17	\$100.00

I certify that the information in my application is true and correct. I give Mountain Empire Community College permission to release my name, address and telephone number to the MECC Education Foundation. I certify that I am **not** eligible or receiving financial assistance from my employer or any other source (for example: senior waiver). I understand that I must attend all classes in order to keep my financial aid for a noncredit class. If I miss a class, I must pay all of the tuition and fees for the class or classes in which I have enrolled. MECC may bill me for the amount I owe.

Applicant's Signature _____ Date _____

FANTIC Coordinator Signature _____ Date _____

Program Coordinator Signature _____ Date _____

WFD Supervisor Signature _____ Date _____

Return this form with copies of all required documentation to Mountain Empire Community College, FANTIC, Division of Workforce Development, 3441 Mountain Empire Road, Big Stone Gap, VA 24219