



## **New Beginnings Application Vernon College**

**NEW BEGINNINGS** is a special services program that provides services to students who are attending Vernon College to obtain a **career and technical education** degree. The student must meet household income requirements and priority needs criteria. Students will be funded through the completion of only one degree/certificate. Pre-requisite semesters will be limited and only one major/area of study change will be allowed. Priority is given to students living in the twelve county service area for a minimum of six months prior to application date. Some of the services available to students who qualify for New Beginnings are: textbooks from the Lending Library, tutoring and either child care or gas reimbursement. New Beginnings applications are received on a first come, first serve basis and eligibility is contingent upon available funding.

**NEW BEGINNINGS OFFICE:  
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4400 College Drive  
Vernon, Texas 76384**

## **REQUIRED DOCUMENTATION**

Before a New Beginnings application will be considered for funding, **COPIES** of the following **MUST** be submitted:

1. **Verification of enrollment:**
  - a. Statement of Student Account
2. **Verification of household gross income:**

**\*Financial aid recipients, your income will be verified through the VC financial aid office.**  
**\*Other students must provide current verification of household income.**

  - a. Dated paycheck stubs (last 2 months) or letter from employer(s)
  - b. Verification of all other income received
3. **Verification of other benefits received:**
  - a. Verification from your Department of Human Services representative of TANF, Food Stamps, Medicaid or other benefits received, letter from Section 8 or HUD housing authority.
  - b. Verification of all other benefits received (includes letters from family/friends providing support)
4. **Proof of custody or guardianship of your children: (one of the following)**
  - a. Birth certificates or Social Security cards
  - b. Divorce decree (pages that award custody and specify amount of child support awarded)
  - c. In the case of a recent separation, a letter from a neighbor or landlord stating where the children are living will suffice.

### **INCOME GUIDELINES**

Family Size	Monthly Income Limit
1	\$2,291
2	\$2,996
3	\$3,701
4	\$4,406
5	\$5,111
6	\$5,816
7	\$5,948
8	\$6,081
9	\$6,213
10	\$6,345
11	\$6,477

### **TEXTBOOK LOANS**

All non-consumable textbooks are to be **returned at the end of each semester!** If not returned, a **hold** will be placed on the student's transcript, registration privilege, and grades.

### **CHILD CARE**

Child care services will be **provided for actual class/lab times** or tutoring appointment times only.

**\*\*NOTE\*\*** We do not pay for child care during the holidays, or finals week. Also, we may not pay for childcare the first week of classes, if time does not allow for our childcare contract completion.

### **GASOLINE REIMBURSEMENT**

Gasoline reimbursement is only for those students driving 40 miles or more per round trip. Gasoline reimbursement may be terminated at any point in the year due to lack of funding at the discretion of the New Beginnings Coordinator.

**VERNON COLLEGE NEW BEGINNINGS APPLICATION**  
**(All information is confidential)**

**Application Date** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Semester/Year Benefits Needed:** \_\_\_\_\_

**Name** \_\_\_\_\_ **SSN** \_\_\_\_\_  
(Last) (First) (MI) **Student ID** \_\_\_\_\_

**Address** \_\_\_\_\_  
(Street) (City) (State) (ZIP)

**Phone #** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Ethnicity:** White African American Hispanic Asian American Indian International Native Other

**Campus:** (Circle all applicable) Vernon Century City SLC STC Seymour

**Have you received New Beginnings benefits previously?** \_\_\_No \_\_\_Yes  
If yes, what was the last semester that benefits were received? \_\_\_\_\_

**Marital Status:** \_\_\_ Single \_\_\_ Married **Education:** \_\_\_ GED \_\_\_ Year  
\_\_\_ Separated \_\_\_ Widowed \_\_\_ High School Diploma \_\_\_ Year  
\_\_\_ Divorced

<b>Number of Dependent Children</b> ____ Names of Household Members _____ _____ _____	<b>Number of Household Members</b> ____ Dates of Birth _____ _____ _____
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**Total Gross Monthly Income** \$ \_\_\_\_\_ **Earned income:** \$ \_\_\_\_\_  
**All other income received:** \$ \_\_\_\_\_ **Child support received:** \$ \_\_\_\_\_ or paid: \$ \_\_\_\_\_

**Do you receive Financial Aid Benefits? Yes \_\_\_ No \_\_\_** If so, what is your FTI? \_\_\_\_\_

**Do you receive any assistance from the following sources?**

\_\_\_ PELL \_\_\_ TRC/DARS \_\_\_ Food Stamps \_\_\_ TANF \_\_\_ Housing \_\_\_ VA  
\_\_\_ WIA \_\_\_ Loans \_\_\_ Medicaid \_\_\_ WIC \_\_\_ Free Lunches \_\_\_ Other

**Educational Goals:** \_\_\_ Career Transition \_\_\_ Associate Degree \_\_\_ Certificate  
**Major or area of interest** \_\_\_\_\_ **\*\*must be career or technical education to qualify**

**I am interested in the following services: (check all that apply)**

<input type="checkbox"/> Tutoring in a specific subject area <input type="checkbox"/> Cosmetology kit <input type="checkbox"/> Nurse Pack <input type="checkbox"/> Textbooks	Choose <b>one</b> of the following: <input type="checkbox"/> Child care during class time <b>or</b> <input type="checkbox"/> Gas Reimbursement (over 40 miles round trip from resident to campus)
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**Academically Disadvantaged:**

\_\_\_ Failed one or more sections of the THEA, Accuplacer, or any TSI placement test  
\_\_\_ Enrolled in one or more remedial classes \_\_\_ Ranked in the bottom quarter of high school class

**Other:**

\_\_\_ English is not my native language \_\_\_ Physical Disability \_\_\_ Documented Learning Disability

**STATEMENT OF FINANCIAL RESOURCES**

I affirm that the financial information I have provided the Vernon College New Beginnings Coordinator is accurate and that I have no other financial resources at this time.

**STATEMENT OF CAREER AND TECHNICAL EDUCATION**

I understand that the New Beginnings program is intended to serve only those students who have a **career and technical education** major. If I am presently undecided as to which workforce major I will choose, I fully intend to choose a certificate or associate degree in the workforce field at Vernon College **within the first semester of enrollment**. I am only allowed one change to my intended workforce major and will only receive funding through the completion of one degree/certificate. I also understand that pre-requisite semester's will be limited. *Intended career and technical education major:* \_\_\_\_\_

**STATEMENT OF FINANCIAL AID ELIGIBILITY**

I understand that receiving gasoline reimbursement or textbook assistance from New Beginnings may affect my financial aid eligibility, including loans. (Please notify the financial aid office, if you do apply for these benefits or have a question how it might affect your financial aid eligibility.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date

**STATEMENT OF CHILD CARE**

**All students requesting child care assistance** must apply with Workforce Solutions Child Care, a state subsidized organization by completing the attached Workforce Solutions application. If the student is placed on a waiting list by WSCC, New Beginnings will start funding the child care assistance until WSCC begins. If the student does not comply with this policy, he/she **WILL** be dropped from child care assistance from New Beginnings. You must notify New Beginnings when you are approved by WSCC. Sign the following acknowledgement and return with the attached WSCC application to our office when you file your NB application.

Student Name : \_\_\_\_\_

SS#: \_\_\_\_\_

I understand that students receiving child care assistance from Vernon College **must apply for state subsidized child care assistance** with Workforce Solutions Child Care (940)723-8774 or (800)232-8359.

I will apply for assistance with Workforce Solutions Child Care, and I understand that I must **call WSCC every two months** to update my application, and **accept** Workforce child care assistance when it is offered.

I understand that failing to seek or accept state subsidized child care assistance is grounds for immediate termination of child care assistance from Vernon College.

I give my permission for New Beginnings staff to contact WSCC in regards to my child care.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date