

What is FANTIC?

Financial Assistance for Noncredit Training that leads to Industry Credentials (FANTIC) provides funding for students who meet the eligibility requirements and **are not eligible for other financial assistance**. This financial assistance will pay for a maximum of 90% of the student's cost for the program. Qualified students are responsible for a minimum of 10% of student cost of the training at the time of registration. **Note: Funding for the FANTIC program is limited and subject to availability.**

What are the qualifications for FANTIC?

Recipient must meet all of the following:

- Be a US citizen or eligible noncitizen. (For more information about citizenship eligibility click [here](#).)
- Recipient must have lived in Virginia continuously for the last twelve months.
- Be eighteen years if he/she has completed high school or earned a high school equivalency. Be nineteen years or older if he/she has not completed high school or earned a high school equivalency.
- Be in compliance with federal Selective Service registration requirements. [Selective Service registration requirements](#).
- Not be enrolled in an associate or bachelor degree program, unless the Workforce program provides training related to the degree program and is necessary to meet a job requirement or advance employment success.
- Enroll in a pre-approved [PVCC Fast Forward program](#).
- Be ineligible for other forms of tuition funding including employer assistance plans or other tuition assistance programs or other state or federal program.
- Demonstrate financial need based on household income by:
 - ⇒ Providing proof that either the student or dependent student's parent(s) is currently eligible for the [Supplemental Nutrition Assistance program \(SNAP\)](#) and/or [Temporary Assistance for Needy Families \(TANF\)](#); or
 - ⇒ Demonstrating that the student or the dependent student's parent(s) has a household adjusted gross income that is either less than 200% or 300% of the [Federal Poverty Guidelines](#) depending on the student's physical home address. This qualification will be determined by the PVCC Workforce Services staff based on a Tax Transcript provided by applicant.
- Must apply to the IRS to get a Tax Return Transcript that must accompany the application to determine their financial eligibility. This process can take up to 10 business days. Click [here](#) to apply for a Tax Return Transcript.
- PVCC can temporarily accept a copy of the recipient's most recent tax return but must receive the Tax Transcript no later than three business days past the class start date.

How do I apply?

- Complete the **FANTIC Application**.
- Applications will be reviewed by the Workforce Services staff to determine qualification. You may be required to apply for other funding sources based on your application responses prior to being evaluated for FANTIC.
- As part of the application process you will also sign a **Memorandum of Understanding** that outlines the expectations of and cost to the recipient and becomes a part of the application packet acknowledging your obligations and responsibilities for obtaining these funds.
- You may be required to submit documentation to support your application.

PVCC Workforce Services Class Cancellation Policy

In the event an applicant wishes to cancel a class, they must adhere to the Workforce Services Cancellation policy which requires a minimum of five days' notice prior to the start of the class to receive a refund. In the event PVCC Workforce Services has to cancel a class, the applicant will be given the option of moving to another section of the same class or receiving a refund. Any financial assistance award refund will revert to PVCC Workforce Services.

Questions?

PVCC Workforce Services

501 College Drive • Charlottesville, VA 22902

Fast Forward Career Coach • fastforward@pvcc.edu • 434.961.5354

www.pvcc.edu/workforce

PVCC FANTIC Application

Only fully completed applications will be reviewed/considered. All required documentation must be provided with your application before the start of class, except for the Tax Transcript which may be submitted up to 3 business days past the start date of the class.

Personal Information

Today's Date: _____

Applicant Name: _____

First

Middle Init.

Last

Street Address / PO box: _____ Apt. # _____

Town/City: _____ State: _____ Zip Code: _____

Social Security Number: _____

Date of Birth: _____ Daytime Phone Number: _____

Email Address: _____

Highest Education Attained:

Some High School

High School Graduate/GED

Some College/Trade School

Associate/Trade School Degree

Bachelor's Degree

Master's Degree

Ph.D. or Ed.D.

Any certifications or credentials currently held: _____

Please answer the questions below to help us determine if **FANTIC** is appropriate for you.

Are you a veteran who is eligible for GI Bill funding?

Yes

No

Are you currently unemployed?

Yes

No

Are you eligible for or receiving unemployment benefits?

Yes

No

If you are employed, were you laid off in the last 20 months and are you currently in an interim or temporary position?

Yes

No

Are you receiving any other tuition assistance from other sources?

Yes

No

If you answer YES to any of the above questions, we will determine if you are eligible for other funding.

Are you currently enrolled in an Associate or Bachelor's degree program?

Yes

No

If currently enrolled, please complete the following:

Name of Institution: _____

Address: _____

City/State/Zip code: _____

Telephone: _____

Program of Study: _____

Expected Completion Date: _____

Have you registered for Selective Services in compliance with the Selective Service Act? Yes No Female Applicant (SSA does not apply)

Identification:

● Official Photo-ID such as driver's license.

● Are you a U.S. citizen or eligible noncitizen?

Yes

No

U.S. permanent resident with a Permanent Resident Card Conditional permanent resident (I-551C) I-94 from the Department of Homeland Security

Click [here](#) for more information about citizenship eligibility.

Proof of Virginia Residency

- Have you lived in Virginia continuously for the last twelve months? Yes No
- For the last twelve months, have you held a Virginia driver's license or Virginia DMV ID? Yes No
- Did you move to Virginia from another state for the purpose of attending school? Yes No
- For the last twelve months, have you filed a Virginia tax return? Yes No
- For the last twelve months, have you owned or operated a motor vehicle registered in Virginia? Yes No
- For the last twelve months, have you been registered to vote in Virginia? Yes No

Age Verification

Provide one of the following legal documents that shows your birthdate

- Birth Certificate State-Issued ID Driver's License Passport _____

Financial Need Verification

Select Option 1 or 2 to verify financial need based on household income.

OPTION 1: SNAP or TANF eligibility

- Current/Active **SNAP Card**, or
(Supplemental Nutrition Assistance Program)
- Current/Active **TANF Card**
(Temporary Assistance for Needy Families)
- Current Documentation stating current eligibility for either SNAP or TANF

OPTION 2: Household Income

Is anyone claiming you as a dependent on their tax return? Yes* No

* If you answer Yes, the Tax Transcript submitted must be from the tax return you are claimed on, not your tax return.

IRS Tax Return Transcript: (Check one)

Click [here](#) to obtain your Tax Return Transcript (allow 10 business days to arrive in mail)

- I have attached a Tax Return Transcript from my most recent Tax Return.
- I have applied for a Tax Return Transcript from my most recent Tax Return.

Based on (1) the Family Size of your household (Exemptions), and (2) ADJUSTED GROSS INCOME on your IRS Tax Transcript, we will use the following table to determine your financial eligibility. To be eligible, your Adjusted Gross Income must be below the listed amount.

Family Size	Maximum Adjusted Gross Income (AGI)	Family Size	Maximum Adjusted Gross Income (AGI)
1 person	\$24,280	5 people	\$58,840
2 people	\$32,920	6 people	\$67,480
3 people	\$41,564	For families/households with more than six persons, add \$4,320 for each additional person	
4 people	\$50,200		

What are your career goals?

Applicant Memorandum of Understanding

I, _____ understand and fully agree to follow the conditions below to receive **FANTIC**.

I have accurately and truthfully completed this application for Financial Assistance for Noncredit Training that leads to Industry Credentials (FANTIC), and have been evaluated/disqualified for all other forms of financial assistance. Failure to fully disclose information or false statements/information will disqualify me from consideration.

I understand the purpose of this funding is to financially assist me to gain the knowledge **AND the applicable industry recognized credential or licensure**. Seeking the applicable credential or licensure, whether it is incorporated in my program or requires me to obtain the certification at additional cost to myself is an **expectation** for accepting these funds.

I understand that, if approved for this funding, I will be responsible for paying a minimum of 10% of the student portion of the cost of the program at time of registration as well as providing all required documentation. The remaining cost of tuition, up to a maximum of 90%, will be covered by WCG FANTIC. All additional costs required for credential/license attainment not included in the cost of the program are **solely my expense**. This includes the cost of the exam, if not included in the tuition, and the cost to retake the exam, if necessary.

I understand that I am responsible for completing the class within 30 days of the class finish date, and attempting to complete the appropriate industry credential/license within 120 days of class completion.

It is my obligation to **present** valid documentation of my industry credential/license to the PVCC Workforce Services Office within 120 days of the class end date.

I understand my obligation to attend all scheduled classes. Absences may compromise my success and ability to acquire the necessary information, training and preparation for certification. I will make the commitment necessary to successfully complete the program requirements and will promptly seek the related credential.

I understand that as part of the **Fast Forward** expectation, if I fail to successfully complete the class, by earning an "S" grade within thirty (30) days of the class end date, I will be responsible for an additional 1/3 of the cost of my program.

I understand there are no job guarantees expressed or implied and the responsibility for finding employment is solely my own.

I understand PVCC Workforce Services may share my information with other supporting agencies.

I agree to respond promptly to requests for information related to this agreement and/or the class if contacted before, during, or after the class and to provide PVCC Workforce Services with a current/updated daytime phone number and email.

I agree to provide information needed to complete the follow-up documentation in a timely manner.

This application is for the following program:

Computer	Industry	Project Management
CompTIA A+	2-Stroke Engine Repair Certification	Certified Associate in Project Management (CAPM)
CompTIA Network+	4-Stroke Engine Repair Certification	Project Management Professional (PMP)
CompTIA Security+	Air Conditioning & Electrical Systems Troubleshooting	Transportation
Health Care	Certified Apartment Maintenance Technician	Commercial Driver's License
Certified Clinical Medical Assistant	Driveline/Hydraulics Certification	Remote Pilot Airman (Part 107)
Certified Nurse Aide (CNA)	Electrical Systems Certification	Welding & Soldering
Registered Medication Aide	Electrical Apprenticeship Levels 1-4	Basic Certified Welder
Pharmacy Technician	EPA Section 608 Technician Certification (HVAC)	Soldering Certification
Phlebotomy Technician	HVAC Apprenticeship Levels 1-4	Welding Certification (GMAW)
	Introduction to Air Conditioning	Pipe Welding Certification (SMAW)
	NCCER Core Craft Skills Credential	
	Photovoltaic Associate (Solar Technician Associate Boot Camp)	

I understand and fully agree to abide by the conditions of the MOU's contractual, financial, and credential obligations as stated above in consideration for receiving PVCC FANTIC Assistance.

Applicant Signature:		Date:	
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THIS SECTION TO BE COMPLETED BY WORKFORCE SERVICES REPRESENTATIVE	
Total Program Cost:	\$
Applicant's Responsibility: (Minimum of 10% of 1/3 of the tuition)	\$
Certification/License Fees:	\$
Other estimated costs:	\$
Total Expense to Applicant:	\$

Questions?

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