**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 □ Current/Active TANF Card
  (Supplemental Nutrition Assistance Program) (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)

- □ 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.

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

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.

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

I understand that 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:

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

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:

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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fastforward@pvcc.edu • 434.961.5338
www.pvcc.edu/workforce