Name: __________________________
MCC ID#: ________________________

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**Support and Empowerment Program (SEP) for Special Populations**

*as defined by Career and Technical Education for the 21st Century Act (Perkins V)*

PROGRAM FUNDED BY CARL PERKINS BASIC GRANT

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**Fall 2019 APPLICATION**

Submit application by **Friday, August 9 at 5 p.m.** to the Completion Center located on the second floor of the Student Services Center.

**If interested in submitting an application past the due date, please consult with the SEP Program Coordinator: Lizette LaStrape, 299-8600**

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**INSTRUCTIONS:**

- Complete the following application in **pen**.
- Submit all required documents with your application. **Incomplete applications will not be accepted.**
- All students are required to have an intake interview when submitting an application. An appointment must be scheduled for this intake interview.
  - **Returning SEP students:** Contact your coach to set up a 20-minute appointment time to submit your application.
  - **New SEP students:** Call 299-8600 to set up a 20-minute appointment time to submit your application.
- You will be notified by email whether you have been accepted into the program. Please make sure your MCC email is set up.

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We’re glad you are interested in being part of the Support and Empowerment Program at MCC! Our goal is to support you. Please don’t hesitate to call us anytime at 299-8600 if you need assistance with the application.
Support and Empowerment Program (SEP) for Special Populations

as defined by Career and Technical Education for the 21st Century Act (Perkins V)

PROGRAM FUNDED BY CARL PERKINS BASIC GRANT

Fall 2019 Application

Due Friday, August 9 by 5 p.m.
Submit to the Completion Center located on the second floor of the Student Services Center.

*PROGRAM CONTINGENT UPON CONGRESSIONAL FUNDING*

Name: ___________________________ ID#: ___________________________

MCC Workforce Program (AKA Degree Plan/Major): _____________________________

Graduation Date: _________________

**Please note that the address and phone numbers listed on this application will be used by SEP Staff to contact you. Do not list unless you consent to be contacted at this phone number/address**

Mailing Address: ________________________________________________
Street ___________ City ___________ Zip Code ___________

Telephone: Home:_____________ Cell:_____________ Work: _______________

Email Address: ___________________________ ☐ I will check my MCC email regularly for announcements

Emergency Contact: ___________________________

Relationship: ___________________________ Telephone: _______________

Did you take classes during Summer 2019? ☐ Yes ☐ No

Have you ever been a part of SEP? ☐ Yes ☐ No

☐ If yes, list most recent semester & year: ___________________________

Have you already earned an Associate’s Degree or Certificate? ☐ Yes ☐ No

☐ If yes, list degree or certificate earned ____________________________________________

Year graduated __________________

If yes, what is your reason for returning to school? ____________________________________________

McLennan provides equal educational opportunity for all qualified students and does not discriminate on the basis of race, color, religion, national origin, gender, disability, age, veteran’s status, genetic information, sexual orientation, gender identity or any other unlawful factors in its educational programs, activities, or employment as required by Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title IX of the Educational Amendments Act of 1972 and the Age Discrimination Act of 1978.
http://www.mclennan.edu/about/eeo
Support and Empowerment Program (SEP) for Special Populations
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Throughout the semester, students who actively participate in the Support and Empowerment Program and meet all eligibility requirements may qualify for either Transportation or Childcare funding.

Please select what type of funding you are interested in receiving this semester:

☐ TRANSPORTATION    OR    ☐ CHILDCARE

• In order to qualify for Childcare funding, you must provide birth certificates and your child/children must be enrolled in a daycare facility licensed by the State of Texas.

SPECIAL POPULATIONS CLASSIFICATION
Please answer each question in order to determine your eligibility for SEP services.
(Additional documentation is required. Please see last page of this application for list of required documents.)

Are you currently receiving any state/federal benefits or assistance such as, Pell, TANF, SNAP, WIC, SSI, Medicaid or Public Housing?
☐ YES  ☐ NO

Do you have a documented disability on file with the MCC Office of Accommodations?
☐ YES  ☐ NO

Are you a single parent (separated, divorced, widowed, never married) who provides more than 50% of the financial support for your minor child/children?
☐ YES  ☐ NO

Are you a single woman (separated, divorced, widowed, never married) pregnant with your first child?
☐ YES  ☐ NO

Are you seeking training for employment in a position usually occupied by the opposite sex (i.e. a non-traditional job)? Ex: A male in a health profession or mental health field; female in business, computers, or emergency service field.
☐ YES  ☐ NO

Is English your native and dominant language?
☐ YES  ☐ NO
Support and Empowerment Program (SEP) for Special Populations
as defined by Career and Technical Education for the 21st Century Act (Perkins V)

PROGRAM FUNDED BY CARL PERKINS BASIC GRANT

Are you an individual who is experiencing or has experienced homelessness anytime during the previous 12 months?
☐ YES  ☐ NO

Are you an individual who has primarily devoted yourself to caring for your home and family and are either:
a. no longer supported financially because of separation, divorce, death, or disability of your spouse?
☐ YES  ☐ NO

b. are caring for a disabled child who will become ineligible for SSI in the next 2 years?
☐ YES  ☐ NO

Are you currently in or have you aged out of the foster care system?
☐ YES  ☐ NO

Do you have a parent who is a member of the U.S. armed forces and is on active duty?
☐ YES  ☐ NO

☐ I understand that the information divulged in this application and in the SEP intake interview will be kept private among SEP staff with the following exceptions: When there is reason to suspect a danger exists to yourself or others; information is reported regarding the suspected abuse to a child, an elderly person, or a person with a disability; information is reported regarding a Title IX related incident; or when the legal system files a subpoena for records.

☐ I understand that all students funded through SEP must meet with an SEP success coach throughout the semester/term for support meetings, complete activities, and attend SEP workshops as assigned. Furthermore, I understand that students who do not fulfill the stated term requirements will not receive funding for that term and may be dropped from the program.

By signing this application, I am declaring that I am one of the listed qualifying populations as defined by the Career and Technical Education for the 21st Century Act (Perkins V). I understand what is required for my participation in the Support and Empowerment Program (SEP) at MCC and, if selected, agree to abide by the SEP guidelines. Further, by signing this form, I understand that funding received for participating in SEP is to strictly be used for its stated purpose and I agree to do so.

Student Signature: ___________________________ Date: ____________

SEP Success Coach: ___________________________ Date: ____________
Support and Empowerment Program (SEP) for Special Populations
as defined by Career and Technical Education for the 21st Century Act (Perkins V)

Program Funded by Carl Perkins Basic Grant

PLEASE SUBMIT ALL OF THE FOLLOWING DOCUMENTS WITH YOUR APPLICATION.
Incomplete applications will not be accepted.

☐ Automated Degree Plan from a Workforce Education Program
   (Associate of Applied Science (AAS) degree or a one-year certificate).

☐ Fall 2019 Class Schedule showing at least 9 hours of classes matching your degree plan, 6 of which must be on-campus or face-to-face. (Clinicals do qualify)

☐ 2019-2020 Financial Aid Award Letter (print from WebAdvisor).

☐ All required supporting documentation to prove your status as one of the eligible Special Populations categories. Required documentation for each category is found below.

Required Supporting Documentation:
Please provide supporting documentation for only one of the classifications that you qualify for below.

- **Economically Disadvantaged or Low-Income Individual** – Please provide all of the following:
  - Your Student Aid Report (SAR) from FAFSA website
  - Official agency documentation showing your current receipt of at least one of the following benefits/assistance: Pell Grant, TANF, SNAP, WIC, SSI, Medicaid or Public Housing

- **Individual with a disability** – No additional documentation is needed.
  - SEP Coordinator will verify within the MCC system that you are registered with our Office of Accommodations.

- **Single Parent** – Please provide all of the following:
  - Your Student Aid Report (SAR) from the FAFSA website
  - Child’s/children’s birth certificate(s) (must be the official state issued birth certificate)

- **Single Pregnant Woman**—Please provide all of the following:
  - Your Student Aid Report (SAR) from FAFSA website
  - Note/document from doctor confirming your pregnancy and due date

- **Individual preparing for a Non-Traditional Field** —Please provide the following:
  - Your Student Aid Report (SAR) from FAFSA website

- **English Learner** – No additional documentation is needed.
  - You will sign a form declaring that you meet the definition of an English learner during your intake appointment.
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Program Funded by Carl Perkins Basic Grant

- **Individual Experiencing Homelessness** – Please provide all of the following:
  - Your Student Aid Report (SAR) from the FAFSA website
  - A written statement from a social service agency attesting provision of services to you anytime during the previous 12-month period
    - Social service agencies may include:
      - Shelter (family shelter, domestic violence shelter, children/youth shelter, FEMA housing)
      - Transitional housing program (available for a specific length of time only and partly or completely paid for by a church, nonprofit organization, government agency, or another organization)
      - High school Homeless Liaison

- **Out-of-Work Individual/Displaced Homemaker** – Please provide all of the following:
  - Your Student Aid Report (SAR) from FAFSA website
  - If applicable: A divorce decree, separation decree, child support order, death certificate of spouse, or proof of spouse’s disability
  - If applicable: Social Security Assistance or Survivor Benefits paperwork for youngest child

- **Current or Former Foster Care Youth** – Please provide all of the following:
  - Your Student Aid Report (SAR) from the FAFSA website
  - DFPS State College Tuition and Fee Waiver Form – Form K-908-1003

- **Dependent of an Active Duty Member of the Armed Forces** – Please provide the following:
  - Department of Defense Dependent Card (DD Form 1173)