

# Central Community College Gap Assistance Application

## General Information:

Name (Last, First, Middle Initial):

Address:

Gender:

Male

Female

City:

State:

Zip Code:

Telephone:

Cell Phone:

Email address:

DOB (MM/DD/YY):

Race/Ethnicity : please check only one

White (non-Hispanic)  Asian or Pacific Islander  Hispanic

Native American

Are you a citizen of the United States?

... Yes ...No

If no, are you a qualified alien under the federal Immigration and Nationality Act?

Copy in Files

Family Names

Gross Income and How Often it was Received

Earnings from Work  
before deductions

Public Assistance,  
Child Support,  
Alimony

How often

Office Use Only:



Gap Program of Study:	
Course Name:	Hours:
Signature and Understandings:	
<p>I certify (promise) that all information on this application is true and correct and that all income is reported and I understand that this information may be verified. I also understand my citizenship information provided may be used to verify my lawful presence in the United States.</p> <p>I understand that eligibility for Gap tuition assistance shall not be construed to guarantee enrollment in any program.</p> <p>I understand this application is valid for six months from the date of signature on this application and that I cannot receive Gap assistance for more than one program.</p> <p>I understand that if it is determined that funding for my participation in this program is available from any public or private funding source my application will be denied.</p> <p>I am aware that if I purposely give false information I may lose my Gap assistance and I may be prosecuted under any applicable State and Federal laws.</p> <p>The undersigned grants permission for photos, video, audio, or other images or voice or audio of them taken and recorded on the date below by Central Community College to be used in print, broadcasting and other forms for advertising; brochures, newsletters and other college publications; on the Central Community College Website; and in audiovisual presentations; and in other activities to promote the college and inform the public about the college. These photos, video or other images or recordings may be used by the college without payment of royalties or other remuneration.</p> <p>Cancellation Policy: Once approved for this GAP Training I understand that I must provide a notice of cancellation at least 10 days prior to the class or it will result in charging the GAP program and you forfeit your opportunity to participate in any other GAP funded programs. I also understand those courses will be listed on my permanent college record as a "No Pass."</p> <p>Have you enrolled in a Gap Assistance program at another Nebraska community college?      Yes      No</p> <p>Will you be claimed on someone else's income taxes?      Yes      No</p> <p>Print name: _____</p> <p>Signature: _____ Date: _____</p>	
_____	_____
CCC Staff Signature	Date
Office Use Only:	
<p>Documentation Required:</p> <p style="text-align: center;">† Employment Pay Stub      † Tax Returns</p>	