



Pennsylvania Higher Education Assistance Agency

PENNSYLVANIA TARGETED INDUSTRY PROGRAM

(PA-TIP) STUDENT APPLICATION ■ 2018-19 AWARD YEAR

INSTRUCTIONS AND INFORMATION:

The following information is needed so that your application can be considered for the Pennsylvania Targeted Industry Program (PA-TIP). If you need further information, please feel free to contact the Pennsylvania Higher Education Assistance Agency (PHEAA) staff at 800-692-7392; TTY: Dial 711 (for hearing impaired); or by email at patip@pheaa.org. You may also visit our website at PHEAA.org/PA-TIP.

STUDENT ELIGIBILITY REQUIREMENTS:

In order to qualify for PA-TIP, applicants must:

- Be a U.S. citizen, or eligible noncitizen as described on the Free Application for Federal Student Aid (FAFSA®)
- Be a domiciliary of Pennsylvania.
- Have received a high school diploma, GED or recognized homeschool certificate.
- File a FAFSA.
- Complete and return to PHEAA the 2018-19 PA-TIP application by **May 1, 2019**.
- Be enrolled on at least a half-time basis at an institution approved by PHEAA for participation in PA-TIP. Full-time is defined as at least 12 credits per term or at least 24 clock hours of continuous enrollment per week. At least half-time is defined as a minimum of 6 credit hours per term or a minimum of 12 clock hours of continuous enrollment per week.
- Not be incarcerated during enrollment.
- Not be in default or pending default on an educational loan or owe a State Grant refund.
- Not be receiving a Pennsylvania State Grant for the program of study.
- Have financial need as determined by the program guidelines and certified by the school.
- Be enrolled in an eligible program of study (see Pages 3-4) that is at least 10 weeks but less than two academic years in length.
- Supply a copy of the DD214 Form if the applicant is a veteran of the U.S. Armed Forces and was honorably discharged.

INFORMATION ON THE PRIVACY ACT AND THE USE OF YOUR Social Security Number:

The Privacy Act of 1974 requires that each federal, state or local agency that asks for your Social Security Number or other information must tell you the following:

1. The agency's legal right to ask for the information and whether the law says you must give it;
2. What purpose the agency has in asking for it and how it will be used; and
3. What could happen if you do not give it.

The number is needed to be sure we know who you are, to process your application, and to keep track of your record. We use your Social Security Number in recording information about your college attendance and to document all information relevant to PA-TIP, including sharing it with the Pennsylvania Department of Labor & Industry in order to exchange post-school separation employment information; and in making sure you have received the benefit of this waiver. If you do not provide your Social Security Number, you are ineligible to receive a PA-TIP award.

PA-TIP applicants are hereby advised that disclosure of their Social Security Number is a requirement and a condition for participation in PA-TIP. PHEAA, without such an identifier, would have difficulty in maintaining proper program records. Section 7(a)(2) of the Privacy Act provides that an agency may continue to require the disclosure of an individual's Social Security Number where the agency required this disclosure under statute or regulations prior to January 1, 1975, in order to verify the identity of the individual. Beginning in 1966 with Form S-1A-66 (First Application), applicants have been required to answer all questions completely or face disqualification for grant assistance. All subsequent forms utilized by PHEAA contain the Social Security Number as the identifier of the applicant, including eligibility announcements forwarded to the financial aid officer of the postsecondary institution.

Mail or fax all required documentation by **May 1, 2019** to:

PHEAA, State Grant and Special Programs, PO Box 8157, Harrisburg, PA 17105-8157 • Fax: 717-720-3786



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PLEASE PRINT

Last Name:		First Name:		MI:	Social Security Number:
Address (P.O. Box must be accompanied by a street address):		City:		State:	ZIP:
Are you a veteran of the U.S. Armed Forces?: <input type="radio"/> YES <input type="radio"/> NO If Yes, please provide a copy of your DD214.					
Telephone Number Home: Other:		Email Address:		Date of Birth:	
Institution you will attend for 2018-19: YTI Career Institute					
Institution Street Address: 1405 Williams Rd		City: York		State: PA	ZIP: 17402
Program of study (corresponding Classification of Instructional Program (CIP) codes begin on <u>Page 3</u>). Please list both the CIP code and the corresponding description: Heating, A/C, Ventilation & Refrigeration Maint. Technology 47.0201					Estimated date program of study begins:
What is your enrollment status?		<input type="radio"/> Full-Time <input type="radio"/> Half-Time <input type="radio"/> Other (please specify):			
<p>By signing this application, I/we authorize PHEAA to make public announcement of any PA-TIP award or rejection of PA-TIP award made to the applicant, and to forward to the institution which the applicant listed (or subsequently indicates that the applicant may attend) all information on any application and all information subsequently submitted to or acquired by PHEAA. I/We also authorize PHEAA, the Pennsylvania Department of Labor and Industry (L&I), and the Pennsylvania Department of Education (PDE) to share information in their respective possession among each other regarding this application and any other information related to the applicant's participation in PA-TIP, regardless of whether such information is the applicant's non-public personally identifiable/confidential information (including, without limitation, PA-TIP award, PA -TIP rejection, information related to the applicant's progress, completion and/or non-completion of the PA-TIP program of study, and post-school separation employment information). I/We declare under penalty of the criminal laws of the Commonwealth of Pennsylvania the application has been examined by me/us and to the best of my knowledge and belief, is a true, correct and complete application (see 24 P.S. § 5158.1 and 18 Pa.C.S.A. § 4904). I/we agree the awarding of PA-TIP awards is based on various factors including available resources and I/we may or may not receive a PA-TIP award regardless of eligibility for a PA-TIP award.</p>					
Signature of Applicant:				Date Signed:	
Parent or Legal Guardian Signature: <small>(Required only if the applicant is less than 18 years of age)</small>				Date Signed:	