



Coastal Villages Region Fund Training - A 4-SITE Program

711 H Street; Suite 200, Anchorage, Alaska 99501 Tel: 888-795-5151 Fax: (907) 278-5150

4-SITE

TRAINING WORKSHOP APPLICATION

Thank you for your interest in Coastal Villages Region Fund 4-SITE Training Program. This program aims at providing training opportunities for CVRF residents in our communities. Our training program provides assistance for residents seeking vocational training primarily in fisheries-related occupations but may be used for hands-on type training (construction, welding, etc...) workshops. A workshop may last from a few days to no more than 12 weeks.

In order to qualify for the program, you must have 1) Resided in a Coastal Villages member community for a minimum of 5 consecutive years; 2) Been accepted into a relevant training certification workshop; 3) Exhibited strong academic skills, or strong work performance, and be committed to completing your training workshop.

Personal Information

Name (Last)	(First)	(Initial)	SSN#
Home (permanent) mailing address			E-mail address
Address while attending school			E-mail address
()			()
Home (permanent) phone number			Phone number while at training
()			()
Occupation	Employer		Work phone number
Year of high school graduation			GPA upon graduation
Number of years you have lived in a Coastal Villages member community			
Number of years you have lived in current residency			
Name of permanent residency			

Training Information

Name of institution/school	Location
Business office address	()
	Phone number
Type of training/courses	Dates of training

Budget Information

Estimated income for training from _____ to _____, 20____

Personal contribution \$ _____

Family contribution \$ _____

Student loan \$ _____

Other (please specify)

_____ \$ _____

_____ \$ _____

TOTAL INCOME \$ _____

Estimated expenses for training from _____ to _____, 20____

Tuition \$ _____

Fees (lab, activity) \$ _____

Books and supplies \$ _____

Dormitory/housing \$ _____

Meal ticket/grocery \$ _____

Travel to/from campus \$ _____

Other (please specify)

_____ \$ _____

_____ \$ _____

TOTAL EXPENSES _____

Statement of Honesty

I certify that the facts and information in this application and in any attachments or supporting documents are true and completed to the best of my knowledge. I understand that any falsification, misrepresentation, or omission, as well as any misleading statements, will void this application and I will be declared ineligible for financial assistance from the 4-SITE Training Program.

Signature

Date

**** Office Use Only****

Amount Recommended

Amount Approved

Recommended By: _____

Approved By: _____

Date: _____

Date: _____

Application Checklist

_____ Application, including:

_____ Acceptance letter from training institution

_____ Resume

_____ 2 letters of recommendation

* All items listed on checklist must be submitted in order to consider this application complete. Applications that are not complete will not be considered for funding. We encourage all applicants to apply for other sources of funding. If you have any questions regarding the application process, you can contact your local CVRF office or the Anchorage office at 888-795-5151 toll-free or 907-278-5151 direct. Additional copies of this application can be found at www.coastalvillages.org.

Mail application to: **CVRF 4-SITE Training**
 711 H Street; Suite 200
 Anchorage, AK 99501

Or

Fax application to: **907-278-5150**