

# APPLICATION FOR GEAR UP FINANCIAL ASSISTANCE FOR EPFP

Individuals from Appalachian GEAR UP school districts in western NC who are interested in EPFP may be eligible for financial assistance. By completing this form, you are requesting the full cost of your EPFP experience to be covered by GEAR UP through Appalachian State University.

## AM I ELIGIBLE?

If you work in or serve students in the following GEAR UP school districts, AND if you are serving students in the following grade levels, you are eligible to participate and receive funding.

Alleghany	Madison
Ashe	Swain
Burke	Watauga
Clay	Wilkes
Graham	Yancey

	21-22	22-23	23-24	24-25	25-26	26-27
6	X					
7	X	X				
8	X	X	X			
9	X	X	X	X		
10		X	X	X	X	
11			X	X	X	X
12				X	X	X

Faculty and staff from the following Appalachian GEAR UP partnering institutions of higher education are also eligible.

Appalachian State University	Tri-County Community College
Asheville-Buncombe Technical Community College	UNC Asheville
Caldwell Community College & Technical Institute	Western Piedmont Community College
Mayland Community College	Wilkes Community College
Southwestern Community College	

## IF APPROVED, HOW ARE EPFP COSTS PAID?

EPFP costs include a tuition/registration fee and travel costs. The tuition/registration fee is paid directly on your behalf by Appalachian State University GEAR UP. If there are travel costs associated with your participation in EPFP events, such as retreats and the Washington Policy Seminar, those costs will need to be budgeted and paid for through your institution/district GEAR UP funds, to be reimbursed by Appalachian State University GEAR UP.

**TO REQUEST EPFP FUNDING THROUGH APPALACHIAN GEAR UP**

Please fill out the following form and submit along with your full EPFP application.

**EPFP applicant initials below:**

- 1) \_\_\_ I understand I am required to attend all EPFP sessions and will only be allowed 1.5 days of missed programming.
- 2) \_\_\_ I understand that I may need to request days away from my normal duties (which may require a substitute teacher, etc.) in order to participate in EPFP.
- 3) \_\_\_ I understand that I must work with the GEAR UP representative at my institution to plan travel and provide adequate receipt documentation for travel expenses.

EPFP Applicant Name: \_\_\_\_\_

**EPFP applicant's supervisor initials below:**

- 1) \_\_\_\_\_ I am this applicant's supervisor and I support this applicant's participation in EPFP.
- 2) \_\_\_\_\_ I understand that my employee's participation in EPFP may mean that they will be absent from regular duties for various events throughout the year.
- 3) \_\_\_\_\_ I understand that the travel costs associated with their participation will be paid for by my agency's GEAR UP funds.

Name of Applicant's Supervisor: \_\_\_\_\_

**EPFP applicant's GEAR UP Representative initials below:**

- 1) \_\_\_\_\_ I understand that the travel costs associated with EPFP will be paid out of my agency's GEAR UP funds and have budgeted for these costs.
- 2) \_\_\_\_\_ I understand that it is my responsibility to ensure EPFP participation is entered into the GEAR UP services database for this participant, and am responsible for tracking their participation.
- 3) \_\_\_\_\_ I understand that it is my responsibility to collect and submit appropriate documentation for travel expense reimbursements.

Name of Applicant's GEAR UP Representative: \_\_\_\_\_