



Postsecondary Education Program Annual Review

Please provide documentation as requested on pages 1 and 2. You must sign this application on both pages.

Your name _____ Social Security number _____

Please provide proof of the following:

- completed application for Economic Services Division Programs and any required verification;
- income from the calendar year preceding the date of the annual review;
- continuing eligibility for VSAC financial assistance and the ability to meet tuition costs;
- good academic standing;
- making satisfactory progress towards degree completion and can graduate within the allowed timeframe.

I agree to provide the proof outlined above.

Applicant's signature

Date of application

We will request the verification below from Vocational Rehabilitation, if applicable:

- in a two-parent family, the non-student parent continues to be unable to work or able to work only part-time, and continues to meet with Vocational Rehabilitation. (PSE rule 2425 A)

Postsecondary Education Program Plan – Review

I understand that in order to remain in the PSE Program, I agree to the following conditions:

- I will limit my employment to no more than 20 hours per week when school is in session. If I wish to work more hours I will discuss this option with my case manager and see if rules will allow this exception (rule 2402.1 D. 8).
- If the other parent of my children lives with me, that parent must work full-time, if able to work full-time, work part-time if able to work part-time. If the other parent is unable to work or only able to work part-time, they must be working with Vocational Rehabilitation.
- I will assign my child support rights to the state and cooperate with the Office of Child Support as a condition of receiving PSE financial assistance.
- I will accept PSE financial assistance instead of Reach Up financial assistance, if I am eligible for PSE financial assistance. I may also choose not to receive any financial assistance.
- I will seek employment using the services of my college's career placement office during the last year of my degree program. If my college does not have a career placement office, I will seek employment using services provided by the Department of Labor's local career resource center.
- I will check in with my PSE case manager at least one time per month.
- I will consult with my PSE case manager in advance if I am considering taking a leave of absence from school.
- I will contact my PSE case manager if I am considering changing my occupation, major, degree or college. I will meet with the PSE committee or give them any additional information to help them review my request.
- I will maintain good academic standing and make progress toward a degree in order to graduate within the allowable timeframe.
- I will remain a member in good standing at the college I attend.
- I will obtain documentation of classroom attendance from my college, and must provide this information on a regular basis to my PSE case manager.

Preference on how to maintain contact with PSE case manager _____:

email phone other _____ frequency (at least monthly) _____

What support(s) do you think you will need from your PSE case manager?

I understand and agree to the conditions outlined above.

Applicant's signature

Date of review application

Please keep a copy of this form for yourself