



# GAP Assistance Application

Directions: Please answer all questions completely and legibly. Failure to do so may impact the timeliness of application process. Send Completed applications to: MPCC GAP Program, ATTN: BCE, 905 E 7th Street, McCook, NE 69001.

Participant Information				
Last Name		First Name		Middle Initial      Social Security No.
Previous/Maiden Name		Birth Date (mm/dd/yyyy)		Email Address
Home Address		City		State      Zip
Home Phone Number			Cell Phone Number	
Do you have a valid driver's license? <input type="radio"/> Yes <input type="radio"/> No				
Have you been convicted of a misdemeanor? <input type="radio"/> Yes (If yes, provide a written statement) <input type="radio"/> No		Have you been convicted of a felony? <input type="radio"/> Yes (If yes, provide a written statement) <input type="radio"/> No		
Race/Ethnicity: Please check only one. <input type="radio"/> White (non-Hispanic) <input type="radio"/> Hispanic <input type="radio"/> Native American <input type="radio"/> Black (non-Hispanic) <input type="radio"/> Asian or Pacific Islander <input type="radio"/> Two or More Races		Are you a citizen of the United States? <input type="radio"/> Yes <input type="radio"/> No If no, are you a qualified alien under the federal immigration and Nationality Act? <input type="radio"/> Yes <input type="radio"/> No If yes, enter your immigration status and alien number: _____		
Are you a Nebraska resident as provided in Neb. Rev.Stat. 85-502? <input type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> AND agree to provide a copy of your USCIS documentation upon request.		
What type of employment are you seeking? <input type="radio"/> Full-time <input type="radio"/> Part-time		When are you available to attending training? <input type="radio"/> Day <input type="radio"/> Night <input type="radio"/> Both		
Education				
Have you received your high school diploma? <input type="radio"/> Yes <input type="radio"/> No		If no, did you receive your GED? <input type="radio"/> Yes, date received _____ <input type="radio"/> No		
High School Attended		City/State		
Have you attended college or any training programs? <input type="radio"/> Yes (If yes, please complete the information below) <input type="radio"/> No				
Institution Name	Dates Attended	Major Area of Study	Degree or Certificate	Date Earned or Anticipated

Employment						
Are you currently employed? <input type="radio"/> Yes <input type="radio"/> No			Are you currently receiving unemployment insurance? <input type="radio"/> Yes <input type="radio"/> No			
Do you have a current and up-to-date resume? <input type="radio"/> Yes (Please attach a copy) <input type="radio"/> No						
Please list all jobs, activities, and other experiences including volunteer work, part-time employment, military service, and self-employment for the past five years, beginning with your most recent position first. (You may attach additional sheets of paper if necessary.)						
Employer (present or most recent)		Employer Phone #		Employer Address-City-State/Zip		
Job Title		Supervisor's Name/Title		Start Date		End Date
Description of Duties			Pay \$ _____ per _____ Reason for Leaving:			
Employer (present or most recent)		Employer Phone #		Employer Address-City-State/Zip		
Job Title		Supervisor's Name/Title		Start Date		End Date
Description of Duties			Pay \$ _____ per _____ Reason for Leaving:			
Employer (present or most recent)		Employer Phone #		Employer Address-City-State/Zip		
Job Title		Supervisor's Name/Title		Start Date		End Date
Description of Duties			Pay \$ _____ per _____ Reason for Leaving:			
Employer (present or most recent)		Employer Phone #		Employer Address-City-State/Zip		
Job Title		Supervisor's Name/Title		Start Date		End Date
Description of Duties			Pay \$ _____ per _____ Reason for Leaving:			
Income Qualifications – Total Household Gross Income						
List yourself, and your spouse if applicable, then income each person earns in whole dollar and how often. Place a "0" to indicate no income.						
**Number of People in Household _____	Earnings from Work Before Deductions		Public Assistance, Child Support, Alimony		Pensions, Retirement & All Other	
Name	Income	How Often	Income	How Often	Income	How Often
Office Use Only						

### Program Interests and Desired Outcomes

What training program are you interested in? (List program name)

Please describe your financial need and why you are requesting GAP assistance?

What are your expectations and goals for next year?

Why should you be awarded this assistance?

### Your Responsibilities as a GAP Program Participant

- Maintain regular contact with faculty of your program,
- Sign any necessary releases to provide relevant information to college faculty or case managers, if applicable,
- Discuss with faculty of your program any issues that may affect your ability to complete the program and obtain and maintain employment,
- Attend all required courses regularly,
- Meet with faculty of your program to develop a job-search plan, and
- Complete surveying when requested by your college.

***\*Your college may terminate your GAP assistance if you fail to uphold these responsibilities.***

### Signature and Understanding

- I certify (promise) that all information on this application is true and correct. I understand that this information may be verified. I also understand that I may be asked to provide documentation to support information provided on this portion of the MPCC GAP Assistance Application.
- I understand that eligibility for GAP tuition assistance shall not be construed to guarantee enrollment in any GAP program.
- 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.
- I certify (promise) that I have not received GAP assistance from any other community college in the State of Nebraska.
- I understand that if it is determined that funding for my participation in this program is available from any other public or private funding source, my application will be denied.
- 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.
- I grant permission to Mid-Plains Community College to release information about my participation in the GAP program to the Nebraska Postsecondary Coordinating Commission.

Print Name

Signature

Date



## MPCC Gap Application Checklist

To Apply for GAP funding, the student needs to:

- Complete the GAP Application and submit required documentation:
  - A copy of last year's tax return (the entire document),
  - A copy of your last pay stub (if living with a spouse, the spouse's pay stub is also needed),
  - Written verification for any additional income you may have (as listed on application).
- Be a resident of the State of Nebraska,
- Be legally eligible to work in the US,
- Have a GED or High School Diploma (some classes allow a high school student to attend),
- Have never received GAP funding from this or another Community College,
- Not have other financial aid for college tuition and fees,
- Meeting income qualifications.

2026 GAP Income Guidelines	
# People in Family Unit	Maximum Family \$ Income
1	\$39,900
2	\$54,100
3	\$68,300
4	\$82,500
5	\$96,700
6	\$110,900
7	\$125,100
8	\$139,300
If family size is greater than 8, add \$5,380 for each additional person.	

\*When all paperwork has been submitted, a determination of eligibility will be made, and the student will be informed of qualification status.

**Questions and/or GAP applications may be directed to:**

*Sharon Kircher, MPCC GAP Coordinator  
905 E 7th Street  
McCook, NE 69001  
308-344-8602  
kirchers@mpcc.edu*