



**Hoopa Career And Technical Program (HCATEP)
Student Textbook/Supplies Request Form**

Please complete the following request form if you would like to participate in the HCATEP Textbook/Supplies Loan Program. HCATEP participants are required to meet with their academic advisor for the approval and submission of this form. All changes to a student's college class schedule must be approved by an HCATEP Advisor. The program will not approve textbook requests for participants who enroll in classes that are not listed on their student education plan and/or if fees are owed to the program until they are paid in full.

To be eligible for textbook/supplies loan program, participants must be in good standing with HCATEP, agree to return all loaned items by the deadline as stated in the program handbook, apply to the Extended Opportunity Programs & Services (EOPS) and submit EOPS proof of purchase or denial of eligibility prior to receiving program textbooks or supplies. Requests must be submitted at least 10 days in advance to allow ample time for processing and delivery of the items to the program.

Student ID: _____ Semester: _____
 Student Name: _____ Phone 1: () _____
 Email Address: _____ Phone 2: () _____

Complete the table below indicating which college courses you are requesting textbooks and/or supplies for the upcoming semester.

College	Section #	Course	Course Location	HCATEP Request (Y/N)	Other Source
1	CR			YES	
2	CR			YES	
3	CR			YES	
4	CR			YES	
5	CR			YES	
6	CR			YES	
7	CR			YES	
8	CR			YES	

I declare that the information contained in this request are true and complete to the best of my knowledge. I authorize the investigation of all statements herein recorded. I release from all liability persons and organizations reporting information required by this form. I understand that I will be subject to dismissal if any statement on this form is found to be untrue.

Student Signature _____ Date

HCATEP Academic Advisor Signature _____ Date



For Hoopa Career And Technical Education Program Staff Use Only:

EOPS Eligible Request Denied Order Date: _____
 EOPS Ineligible Reason: _____ Order Received: _____
 Request Approved _____ Contact Date: _____