



**Hoopa Career And  
Technical Education  
Program Intake  
Application**



The Hoopa Career And Technical Education Program (HCATEP) has been continuously funded by the United States Department of Education since 1994. The goal of this vocational and technical education program is to increase employment and entrepreneurship in the private sector and tribal enterprise. Funded through the Carl D. Perkins Vocational and Applied Technology Education Act P.L. 101-932, this grant funded program works in partnership with College of the Redwoods to provide quality educational programs to interested community members so they may pursue high skilled, high waged employment in existing and emerging occupations.

Students who are interested in applying for HCATEP services must complete an intake packet and submit all of the required supporting documents by the end of the business day on the following dates:

<b>Fall Semester: August 15th</b>	<b>Spring Semester: January 5th</b>	<b>Summer Semester: One week prior to start date.</b>
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**Note: When the program application deadline falls on a weekend, HCATEP Intake Applications and all supporting documentation must be received by the end of the business day on the following Monday.**



**Required Intake Application Documents**

- Intake Application
- Student Placement Status Survey
- Participation Agreement
- College of the Redwoods Information Sharing Agreement
- CR & HCATEP Release of Information
- Tribal Identification Card or Certification of Indian Blood Degree
- High School Transcript, GED/Enrollment in a Equivalency Program
- HCATEP Letter of Commitment
- Household Income Verification
- Free Application For Federal Student Aid (FAFSA) Confirmation College of the Redwoods
- Optional Fee Waiver
- Extended Opportunity Programs & Services Confirmation
- College Transcripts (if applicable)

**Optional Student Support Programs**

- HCATEP Textbook Request Form
- HCATEP Stipend Application
- HCATEP Mileage Assistance Application
- Tribal Grant/Scholarship or BIA Application
- Disability Services and Programs for Students Application
- College of the Redwoods or Community Scholarships





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<p><b>Application Request</b></p> <p><input type="checkbox"/> Fall _____</p> <p><input type="checkbox"/> Spring _____</p> <p><input type="checkbox"/> Summer _____</p>	<p><b>Student Information</b></p> <p>_____</p> <p style="text-align: center;">Last Name                      First Name                      M                      Other Names Used</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Physical Address                      Female                      Male</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Mailing Address                      Social Security Number</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Cell Phone Number                      Message Number                      Date of Birth</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Email Address ~ Required                      Age</p>			
<p><b>Educational Status</b></p> <p><input type="checkbox"/> New</p> <p><input type="checkbox"/> Continuing</p> <p><input type="checkbox"/> Returning</p>	<p><b>Ethnicity</b></p> <p>American Indian    Tribe: _____</p> <p>Non-Indian            Roll #: _____</p>			
<p><b>Marital Status</b></p> <p><input type="checkbox"/> Single</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Legally Separated</p> <p><input type="checkbox"/> Legally Separated</p> <p><input type="checkbox"/> Divorced</p> <p><input type="checkbox"/> Widowed</p>	<p><b>Employment Status</b></p> <p><input type="checkbox"/> Full-time</p> <p><input type="checkbox"/> Part-time</p> <p><input type="checkbox"/> Seasonal</p> <p><input type="checkbox"/> Regular</p> <p><input type="checkbox"/> Temporary</p> <p><input type="checkbox"/> Self-Employed</p> <p><input type="checkbox"/> Unemployed</p>		<p><b>Source of Income</b></p> <p><input type="checkbox"/> TANF</p> <p><input type="checkbox"/> General Assistance</p> <p><input type="checkbox"/> SSI</p> <p><input type="checkbox"/> Unemployment</p> <p><input type="checkbox"/> Other _____</p>	
<p><b>Education History</b></p> <p><input type="checkbox"/> HS Graduate</p> <p><input type="checkbox"/> Not HS Graduate</p> <p><input type="checkbox"/> GED Prg</p> <p><input type="checkbox"/> HS Proficiency Prg</p> <p>_____</p> <p>Name of GED Prg</p> <p>_____</p> <p>Start Date of GED Prg</p> <p>_____</p> <p>Graduation Date</p>	<p><b>Employer Information</b></p> <p>_____</p> <p style="text-align: center;">Organization                      Position</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Mailing Address</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Work Telephone                      Supervisor</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Employment Start Date</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Employment End Date</p>		<p><b>Household Information</b></p> <p>_____</p> <p style="text-align: center;">Hourly Wage</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Annual Salary</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Total Household Income</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Total # in Household</p>	
Name of College	City/State	Date(s) Attended	# of Units Completed	<p>I would like information about the following:</p> <p><input type="checkbox"/> Disability Services</p> <p><input type="checkbox"/> Financial Aid/Scholars</p> <p><input type="checkbox"/> Mileage Assistance</p> <p><input type="checkbox"/> Tutorial Assistance</p> <p><input type="checkbox"/> Stipend Program</p> <p><input type="checkbox"/> Textbook Assistance</p>





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<b>Area of Interest</b> <input type="checkbox"/> Early Childhood <input type="checkbox"/> Business <input type="checkbox"/> Computers <input type="checkbox"/> Fine Arts/Studio Arts <input type="checkbox"/> Forestry Technology <input type="checkbox"/> Liberal Arts <input type="checkbox"/> Social Work <input type="checkbox"/> Specialized Voc. Training <input type="checkbox"/> Other: _____ _____	<b>While enrolled in the HCATEP what skills do you expect to gain? (Please mark the box(es) that best describes your answer)</b>  <table> <tr> <td><input type="checkbox"/> Gain Employment</td> <td><input type="checkbox"/> Earn High School Diploma/GED</td> </tr> <tr> <td><input type="checkbox"/> Professional Development</td> <td><input type="checkbox"/> Personal Development</td> </tr> <tr> <td><input type="checkbox"/> Increase Job Skills</td> <td>Other: _____</td> </tr> <tr> <td><input type="checkbox"/> Maintain a License/Certification</td> <td></td> </tr> </table>	<input type="checkbox"/> Gain Employment	<input type="checkbox"/> Earn High School Diploma/GED	<input type="checkbox"/> Professional Development	<input type="checkbox"/> Personal Development	<input type="checkbox"/> Increase Job Skills	Other: _____	<input type="checkbox"/> Maintain a License/Certification	
	<input type="checkbox"/> Gain Employment	<input type="checkbox"/> Earn High School Diploma/GED							
<input type="checkbox"/> Professional Development	<input type="checkbox"/> Personal Development								
<input type="checkbox"/> Increase Job Skills	Other: _____								
<input type="checkbox"/> Maintain a License/Certification									
<p>I declare that the information in this application is true and complete to the best of my knowledge. I authorize investigation of all statements herein recorded. Further, I release from all liability persons and organizations reporting information required by this application. I understand that I will be subject to dismissal if any statement on this application is found to be untrue. I also understand that my eligibility is conditional and I must comply with all Hoopa Career And Technical Education Program Policies or I will be dismissed from the program.</p> <p>_____</p> <p style="text-align: center;">Student Signature <span style="float: right;">Date</span></p>									

For Office Staff Use Only	Comments
<input type="checkbox"/> Intake Complete <input type="checkbox"/> Eligible for HCATEP <input type="checkbox"/> Intake Incomplete <input type="checkbox"/> Ineligible for HCATEP	_____ _____ _____ _____
<b>Application Reviewed By</b> _____ <div style="text-align: center;">Intake Staff</div>	_____ <div style="text-align: center;">Date</div>
_____ <div style="text-align: center;">Intake Staff</div>	_____ <div style="text-align: center;">Date</div>





**Hoopa Career And  
Technical Education  
Program Employment/  
Unemployment  
Verification Form**



Name: \_\_\_\_\_

ID#: \_\_\_\_\_

I certify that my current income is based on the following:

- Wages       TANF       Other  
 SSD/ SSI       CalWORKs  
 GA

Please attach current income verification for yourself and spouse or significant other. Acceptable forms of income verification are income tax forms, check stubs, passport to services or county verification, and/or a letter of income from the Social Security Office.

**If you are not currently working,  
please complete the certification below:**

- Unemployed  
 Underemployed

**Further, I certify that I that I am not currently receiving any  
monthly disbursements of any kind. Below is an explanation of  
my current living situation:**

- Live with family members  
 Live with friend  
 Live with significant other  
 Homeless  
 Self-Employed (please explain): \_\_\_\_\_  
 Other (please explain): \_\_\_\_\_

I hereby certify that all information reported on this form is true, complete and accurate. False statements or misrepresentations will be cause for denial, withdrawal and/or repayment of services and benefits paid by the Hoopa Career And Technical Education Program. I also hereby give my permission for the program to verify my status of employment with the Employment Development Department or other necessary agencies.

\_\_\_\_\_  
Student Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
HCATEP Intake Staff Signature





**Hoopa Career And  
Technical Education  
Program Student  
Placement Status  
Survey**



<p><b>Semester &amp; Year</b></p> <p><input type="checkbox"/> Fall _____</p> <p><input type="checkbox"/> Spring _____</p> <p><input type="checkbox"/> Summer _____</p>	<p><b>Student Information</b></p> <p>_____</p> <p style="text-align: center;">Last Name                      First Name                      M                      Other Names Used</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Physical Address                      Female                      Male</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Mailing Address                      Social Security Number</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Cell Phone Number                      Message Number                      Date of Birth</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Email Address ~ Required                      Age</p>		
<p><b>Tribal Affiliation</b></p> <p><input type="checkbox"/> Hupa</p> <p><input type="checkbox"/> Karuk</p> <p><input type="checkbox"/> Yurok</p> <p><input type="checkbox"/> Other: _____</p>	<p><b>Employer Information</b></p> <p>_____</p> <p style="text-align: center;">Organization                      Position</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Mailing Address</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Work Telephone                      Supervisor</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Employment Start Date</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Employment End Date</p>		
<p><b>Employment Status</b></p> <p><input type="checkbox"/> Full-time</p> <p><input type="checkbox"/> Part-time</p> <p><input type="checkbox"/> Seasonal</p> <p><input type="checkbox"/> Temporary</p> <p><input type="checkbox"/> Self-Employed</p> <p><input type="checkbox"/> Unemployed</p> <p><input type="checkbox"/> Other: _____</p>	<p><b>Status Changes</b></p> <p>Has there been changes to your employment?</p> <p style="padding-left: 20px;">Yes</p> <p style="padding-left: 20px;">No</p> <p>If yes, do you consider the change(s) beneficial to you?</p> <p style="padding-left: 20px;">Yes</p> <p style="padding-left: 20px;">No</p> <p style="padding-left: 20px;">N/A</p> <p>If yes, please describe the change below.</p> <p>_____</p> <p>_____</p>		
<p><b>For Staff Use Only</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>			

I declare that the information in this application is true and complete to the best of my knowledge, and I authorize investigation of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application. I understand that I will be subject to dismissal if any statement on this application is found to be untrue. I also understand that my eligibility is conditional and I must follow and comply with all Hoopa Career And Technical Education Program Policies or I will be dismissed from the program.

**Survey Reviewed By:**

\_\_\_\_\_

Academic Advisor / Retention Specialist

\_\_\_\_\_

Date

\_\_\_\_\_

Student Signature

\_\_\_\_\_

HCATEP Intake Staff Signature





**Hoopa Career And  
Technical Education  
Program Student  
Participation  
Agreement**



Student Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The Hoopa Career And Technical Education Program Participation Agreement provides an overview of the program policies. Please read the statements below and initial in the corresponding box showing you understand and agree with the following statements.

1. will complete all Hoopa Career And Technical Education Program and College of the Redwoods required enrollment, financial aid, student services applications and questionnaires to determine my eligibility. If I fail to complete these application processes, I understand I may be ineligible for one or more services.
2. I am required to submit a California College Promise Grant Application and a Free Application for Federal Student Aid (FAFSA) each academic year and provide the Hoopa Career And Technical Education Program with verification of eligibility no later than the program deadline.
3. I am responsible for checking my college email account regularly to maintain compliance with College of the Redwoods departmental requests including those from the Financial Aid Office. If I fail to complete the financial aid and/or Promise Grant Application processes or if I am found ineligible, I will be responsible for all college related fees.
4. If a “dependent” student is ineligible for financial aid due to parental income, the Hoopa Career And Technical Education Program will provide California resident enrollment and health fee assistance. All other college related fees will be the responsibility of the student and the parent.
5. In the event that the college issues a refund check to me in error, I understand that I will be responsible to pay the full amount in full. The Hoopa Career And Technical Education Program will not pay college or financial aid fees paid to a student in error or any debt(s) accrued due to a refund error.
6. I will complete a minimum of 6 units each semester to be eligible for direct services with the exception of students who are actively participating in College of the Redwoods Disability Services and Programs for Students (DSPS).
7. I am responsible for all out-of-state tuition and fees. The Hoopa Career And Technical Education Program will not provide assistance for any fees associated with being a non-resident.
8. I will attend the Hoopa Career And Technical Education Program and College of the Redwoods Orientation and read the student handbook. Program orientation attendance is mandatory in order to receive direct services. If I fail to attend, services will be withheld until orientation has been completed.
9. I will meet with my HCATEP Academic Advisor or Counselor at least three times during each semester (beginning, middle, and end of the semester) to discuss my academic progress.
10. Class attendance is critical to academic success. If I must miss a class, I will make arrangements to make-up missed assignments with my instructor(s) immediately.
11. To stay in “good standing,” I will keep my student file updated, attend program appointments and activities (unless prior arrangements with the program have been approved), pay all outstanding fees and maintain satisfactory progress.
12. I will enroll in only those classes required to complete a certificate or degree program with the exception of program sponsored classes. I will meet with my program academic advisor to outline and approve my college classes before registering and before dropping any class(es).





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13. I must complete my educational goal within 70 attempted units to remain eligible for direct services. If I change my goal or withdraw from classes, I will be responsible for completing the remaining courses without help from the program after 70 units has been attempted. I may be eligible for additional services if my appeal is approved by the Hoopa Career And Technical Education Program Director.
14. I give permission for my name, image, tribal affiliation and grade point average to be publicized for outstanding academic achievement and/or upon completion of a certificate and/or degree from College of the Redwoods in a program newsletter, flyer, website, community newspaper, or similar publication.
15. I understand that the Hoopa Career And Technical Education Program will request mid-semester academic progress reports from my College of the Redwoods instructors each semester. I will meet with my program academic advisor to discuss all progress reports received on my behalf.
16. The Hoopa Career And Technical Education Program uses a One Call automated system. By becoming a HCATEP student, I understand that I will receive automated calls, text messages or emails regarding program and/or college appointments, events and emergency notifications.
17. I have the right to file a grievance if an action was taken that I feel is unjust. I will use the grievance procedure to resolve program related issues. Further, all complaints regarding staff, instructors, or other individuals must be done respectfully and in the following manner:
  - a. I will attempt to talk to the person first to attempt to resolve the issue.
  - b. If the issue is not resolved, I can document the incident and submit it to the Hoopa Career And Technical Education Program Director for assistance.
  - c. If the problem cannot be resolved with the Hoopa Career And Technical Education Program Director, the student can appeal the decision by submitting a written grievance that summarizes the situations that have occurred within ten (10) days.
  - d. If this situation is still not resolved, a second appeal can be made in writing and referred to the Education Board. The decision of the Education Board will be final.
18. I can be dismissed from Hoopa Career And Technical Education Program for any of the following circumstances:
  - a. Possession or use of any illegal substance or alcohol on the Education premises or during a Hoopa Higher Education Program and/or a College of the Redwoods function
  - b. Cheating, plagiarism, misuse of program documents, or furnishing false information to the program.
  - c. Possession of any deadly weapon on campus;
  - d. Disruptive behavior such as: verbal threats and physical abuse to others, damage to program property, inordinate demands for time and attention, and harassing an instructor or program staff;
  - e. Violating any HCATEP program or Student Services Policies.

By signing below, I declare that I have read the above mentioned statements and agree to the terms listed in this agreement. Further, I understand that failure to fulfill these terms may result in a denial of services or subsequent disqualification from the Hoopa Career And Technical Education Program. This consent will remain in effect until I complete a new Participation Agreement or complete my educational program with College of the Redwoods and/or Hoopa Career And Technical Education Program.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
HCATEP Staff Signature

\_\_\_\_\_  
Date





**Hoopa Career And  
Technical Education  
Program Information  
Sharing Agreement**



Student Name: \_\_\_\_\_ CR Student ID#: \_\_\_\_\_

I, \_\_\_\_\_ hereby consent to, and request, that any information on my academic progress including assessments, transcripts, student education plans, petitions, financial aid, payment delinquencies, disciplinary problems, and similar matters regarding my enrollment with College of the Redwoods be provided to the Hoopa Career And Technical Education Program.

I understand that the personal information I provide or have released to the Hoopa Career And Technical Education Program is protected by the Family Educational Rights and Privacy Act (FERPA). Further, I understand that my information is consider confidential and may not be shared by any that is not employed with the Hoopa Career And Technical Education Program. This consent will remain in effect until I rescind my consent in writing or I complete my education at College of the Redwoods.

\_\_\_\_\_

Student Signature

\_\_\_\_\_

Date





**College of the Redwoods Klamath-Trinity  
Instructional Site & Hoopa Career And  
Technical Education Program  
Release of Information Form**



Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

I, hereby consent to, and request, that any information on my academic progress including assessments, transcripts, student education plans, petitions, financial aid, and similar matters regarding my enrollment with College of the Redwoods and the Hoopa Career And Technical Education Program be released to:

\_\_\_\_\_  
(Name of Individual/Agency)

Further, I understand that the personal information I provide or authorize the above listed program staff to access is protected by the Privacy Act. This consent will remain in effect until I rescind my consent in writing or I complete my education with College of the Redwoods and the Hoopa Career And Technical Education Program.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

