

## EDUCATION AND TRAINING VOUCHER PROGRAM REQUEST OF FUNDS FORM

### **REQUEST OF FUNDS INSTRUCTIONS**

What is a Request of Funds form?

A Request of Funds form allows the ETV Coordinator to send payment directly to the vendor and/or individual requesting the funds.

#### How do I submit for payment? (PLEASE READ CAREFULLY)

- 1. Enter the Name and complete Address of the vendor or individual receiving funds.
- 2. If applicable, enter Account/Apartment Number.
- 3. Under <u>Budget Worksheet Items</u> enter the <u>Amounts</u> directly from your Budget Worksheet, then put the <u>Total Amount</u>. \*\*Amounts for the items must match Budget Worksheet exactly.
- 4. Enter your **Student Name** and **Phone Number.**

#### **Examples:**

#### Release of Funds Example:

BC FS Health and Human Services • Est. 1944		EDUCATION AND TRAINING VOUCHER PROGRAM REQUEST OF FUNDS FORM			
John Smith			FY:		
Address: 1234 Fruit Road			W. C.		
San Antonio, TX 771	11				
Account/Apartment Number (	If Applicable	e) Apt. #0000			
Change of Address	200	la a			
Budget Worksheet Items	Amount	Budget Worksheet Items	Amount		
Residential Housing or Room/Board		Books			
Vocational (Training Program)	2	School Supplies			
Educational		Laptop			
Utilities		Computer Supplies			
Vehicle Insurance	1000	Software			
Fuel	500	Food			
Maintenance/Repairs	2	Clothes/Personal Hygiene			
Purchase of Bicycle		Childcare			
Bus pass		Total Amount: 1500			
Medical		7			
Student Name:  John Smith					
or Assistance or Information: ETV: 4346 Loo	p 410 San Antonio	TX 78229, Phone: 1-877-268-4063, Fax: 210-20	08 -5605, www.texasetv.com		
Approved By:					
ETV Coordinator		Date			
ETV Program Director, Region	al Director, o	r Executive Director Date	1-2		
FOR OFFICE USE ONLY:					
Description of Goods:					
Γ:					
H:					
Π:					

#### Rent Example:

Apple Apartments Lea	sing Office		FY:
lame: 1234 Fruit Road			1
Address: San Antonio, TX 7711	1		
			8
Account/Apartment Number (I Change of Address	т Аррисавіє	e) Apr. #0000	
Budget Worksheet Items	Amount	Budget Worksheet Items	Amount
Residential Housing or Room/Board	1000	Books	
Vocational (Training Program)		School Supplies	
Educational		Laptop	
Utilities		Computer Supplies	8
Vehicle Insurance		Software	
Fuel		Food	
Maintenance/Repairs		Clothes/Personal Hygiene	8
Purchase of Bicycle		Childcare	
Bus pass		Total Amount: 1000	
Medical			
Student Name:		Phone Number:	
John Smith		111-333-4444	
or Assistance or Information: ETV: 4346 Loop	410 San Antonio	TX 78229, Phone: 1-877-268-4063, Fax: 210-20	8-5605, www.texasetv.com
ETV Coordinator		Date	
7.0	al Director, o	r Executive Director Date	
FOR OFFICE USE ONLY:			



# EDUCATION AND TRAINING VOUCHER PROGRAM REQUEST OF FUNDS FORM

Residential Housing or Room/Board Books  Vocational (Training Program) School Supplies  Educational Laptop  Utilities Computer Supplies  Vehicle Insurance Software  Fuel Food  Maintenance/Repairs Clothes/Personal Hygiene  Purchase of Bicycle Childcare  Bus pass Medical Total Amount  Student Name: Phone Number:  For Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208-5605, www.lexasetv.co  Approved By:  ETV Coordinator Date  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Name:			FY:	
Change of Address  Budget Worksheet Items	Address:				
Change of Address  Budget Worksheet Items					
Budget Worksheet Items	Account/Apartment Number (	(If Applicable	e)		
Residential Housing or Room/Board Vocational (Training Program) School Supplies Educational Utilities Computer Supplies Vehicle Insurance Software Vehicle Insurance Fuel Food Maintenance/Repairs Clothes/Personal Hygiene Purchase of Bicycle Bus pass Medical  Student Name: Phone Number:  Phone Number:  Tor Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208-5605, www.texasetv.or  Approved By:  ETV Coordinator Date  FOR OFFICE USE ONLY:  Description of Goods:  T: H:	Change of Address				
Vocational (Training Program)  Educational  Laptop  Utilities  Computer Supplies  Vehicle Insurance  Fuel  Food  Maintenance/Repairs  Purchase of Bicycle  Bus pass  Medical  Student Name:  Phone Number:  For Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208-5605, www.texasetv.cc  Approved By:  ETV Coordinator  Date  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Budget Worksheet Items	Amount	Budget Worksheet Ite	ems	Amount
Educational Laptop  Utilities Computer Supplies  Vehicle Insurance Software  Fuel Food  Maintenance/Repairs Clothes/Personal Hygiene  Purchase of Bicycle Childcare  Bus pass Total Amount  Medical Phone Number:  For Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208-5605, www.lexasetv.ce  Approved By:  ETV Coordinator Date  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Residential Housing or Room/Board		Books		
Utilities Computer Supplies  Vehicle Insurance Software  Fuel Food  Maintenance/Repairs Clothes/Personal Hygiene  Purchase of Bicycle Childcare  Bus pass Medical Total Amount  Brunder Name: Phone Number:  Phone Number:  Provided By:  ETV Coordinator Date  ETV Program Director, Regional Director, or Executive Director Date  FOR OFFICE USE ONLY:  Description of Goods:  I :  H:	Vocational (Training Program)		School Supplies		
Vehicle Insurance Fuel Fuel Food Maintenance/Repairs Clothes/Personal Hygiene Purchase of Bicycle Bus pass Medical  Student Name: Phone Number:  Phone Number:  Total Amount  Phone Number:  Total Amount  Date  TV Program Director, Regional Director, or Executive Director  Date  FOR OFFICE USE ONLY: Description of Goods:  I: H:	Educational		Laptop		
Fuel Food  Maintenance/Repairs Clothes/Personal Hygiene  Purchase of Bicycle Bus pass Medical  Student Name: Phone Number:  Or Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208 -5605, www.texasetv.ce  Approved By:  ETV Coordinator Date  TOTAL Amount  D	Utilities		Computer Supplies		
Maintenance/Repairs Purchase of Bicycle Bus pass Medical  Childcare  Total Amount  Phone Number:  Phone Number:  Pro Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208 -5605, www.texasetv.ce  Approved By:  ETV Coordinator  Date  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Vehicle Insurance		Software		
Purchase of Bicycle Bus pass Medical  Total Amount  Phone Number:  Phone Number:  For Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208 -5605, www.texasetv.ce  Approved By:  ETV Coordinator  Date  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Fuel		Food		
Bus pass  Medical  Student Name:  Phone Number:  For Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208-5605, www.texasetv.co  Approved By:  ETV Coordinator  Date  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Maintenance/Repairs		Clothes/Personal Hygiene		
Phone Number:  For Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208 -5605, www.texasetv.ce  Approved By:  ETV Coordinator  Date  ETV Program Director, Regional Director, or Executive Director  Date  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Purchase of Bicycle		Childcare		
Phone Number:  Phone	Bus pass		Total Amount		
Tor Assistance or Information: ETV: 4346 Loop 410 San Antonio TX 78229, Phone: 1-877-268-4063, Fax: 210-208 -5605, www.texasetv.co.  Approved By:  ETV Coordinator  Date  ETV Program Director, Regional Director, or Executive Director  Date  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Medical				
ETV Coordinator  Date  ETV Program Director, Regional Director, or Executive Director  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:		p 410 San Antonio	TX 78229, Phone: 1-877-268-4063,	Fax: 210-208 -5605, www.t	texasetv.con
ETV Program Director, Regional Director, or Executive Director  FOR OFFICE USE ONLY:  Description of Goods:  T:  H:	Approved By:				
FOR OFFICE USE ONLY: Description of Goods: T: H:	ETV Coordinator			Date	
Description of Goods: T: H:	ETV Program Director, Region	al Director, o	or Executive Director	Date	
T: H:	FOR OFFICE USE ONLY:				
H:	Description of Goods:				
H:	Т:				
	U:				