



Solar Installation Training and Evaluation EARN Green Grant Intake Form

Hagerstown Community College is the recipient of a Maryland Department of Labor, Licensing and Regulation (DLLR) job training grant, which provides reduced tuition for specific solar PV training programs. Submission of intake form does not guarantee funding will be awarded.

Applicant Information:	
Name:	Telephone:
Street Address:	City, State, Zip:
County:	Email Address:
Birth Date:	Social Security #:
Race: (please check all that apply) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Hispanic/Latino	National Origin: <input type="checkbox"/> American <input type="checkbox"/> North American (excluding American) <input type="checkbox"/> Central and Latin American <input type="checkbox"/> European <input type="checkbox"/> African <input type="checkbox"/> Middle Eastern <input type="checkbox"/> Asian <input type="checkbox"/> Oceania <input type="checkbox"/> Two or More <input type="checkbox"/> Other

Eligibility Information:	
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a Maryland resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a high school diploma or GED?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been convicted of a crime or served time for a conviction that would affect employment? If yes, please explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Employment Status: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed
If employed, what is your highest hourly rate? _____
Are you currently employed with: <input type="checkbox"/> Solar company <input type="checkbox"/> Electrical/Electrician <input type="checkbox"/> Authorities Having Jurisdiction (Code Inspector) <input type="checkbox"/> None of the above
Are/were health benefits offered at current or most recent job? <input type="checkbox"/> Yes <input type="checkbox"/> No

“This project was funded in whole or in part by funds received from EARN Maryland, a Grant program of the Maryland Department of Labor, Licensing and Regulation.”

What is your highest educational attainment?		
<input type="checkbox"/> High School	<input type="checkbox"/> Associates Degree	<input type="checkbox"/> Advanced Degree
<input type="checkbox"/> Some College	<input type="checkbox"/> Bachelor's Degree	<input type="checkbox"/> Trade School
Are you eligible to work in the United States?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you the spouse or dependent of a full-time HCC employee?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Military Status (please choose one): <input type="checkbox"/> Active Duty <input type="checkbox"/> Veteran <input type="checkbox"/> None		
Spouse's Military Status (please choose one): <input type="checkbox"/> Active Duty <input type="checkbox"/> Veteran <input type="checkbox"/> None		
What is your career goal? <input type="checkbox"/> Solar Installer <input type="checkbox"/> Solar Inspector <input type="checkbox"/> Both		

I hereby certify that the information I have submitted is correct. I authorize the release of this information to Hagerstown Community College, Maryland Department of Labor, Licensing and Regulation, grant partners and potential employers. I will provide additional information or verification upon request.

If applicable, I further agree to submit to all grant required application testing (including criminal background check and drug screen) as part of the EARN Green SITE intake process. Failure to do so will invalidate my grant submission.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

<i>Application Status</i>	Referral Agency:
Dated received:	Notes:
Date reviewed:	
Date applicant contacted:	