



RONALD REEVES JOB READINESS GRANT PROGRAM APPLICATION

Overview:

The Ronald Reeves Job Readiness Grant is available to Lenawee County graduates or residents seeking training for a job or bettering their current job status through the Lenawee County Education Foundation (LCEF). It is named after Ron Reeves who spearheaded grants for non-degree programs as a result of only 3 out of 10 Lenawee County high school graduates ever obtain a degree. This rate is similar to the state and national rates. LCEF works with Michigan Works because we have the same end goals, helping people obtain meaningful employment that allows a good quality of life and self-sufficiency.

Qualifications:

- Applicant must be a high school graduate or obtained their GED Certificate and reside within Lenawee County.
- Applicants must apply through LCEF and agree to go through the Michigan Works Southeast for their job training intake system.
- Applicant must be seeking job training for initial career, career improvement or career change.

Instructions:

1. Complete all questions – circle or identify if there are choices, example yes or no; field of training.
2. After completing and reading the disclaimers, please print, sign and date the application.
3. Scan and email the application to: kristy.suiter@lisd.us or mail to: LCEF, 4107 N. Adrian Hwy., Adrian, MI, 49221.
4. If you have the program description from offering material, please include with your application.
5. Any questions call LCEF at 517-265-1626.

Date of application: _____

Questions – general:

Full Name: _____

Current address: _____

Best phone # to reach you at: _____

Best email to reach you at: _____

Date of Birth: _____

Gender: _____

Ethnicity: _____

Graduated from what Lenawee County High School: _____

- Year Graduated: _____
- Have you attended college? Yes/No; if yes how many years? _____

I understand that any grant, if awarded to me, is for pursuing the course of study at the training facility stated in said application(s). If for any reason my plans change, I will inform the Lenawee County Education Foundation in writing. At that time the Foundation will have the right to reevaluate my application and revoke any grant award(s). I further understand that failure to notify the Foundation of any change in my plans will result in automatic revocation of any grant(s) that I might have otherwise received from the Foundation. Please check the box acknowledging agreement.

I understand that the Lenawee Intermediate School District or Lenawee County Education Foundation may publish my name and photograph if I am awarded a grant. I understand that my application will be provided to Michigan Works to begin their intake process. I also authorize Michigan Works to contact me to begin the process. Please check the box acknowledging agreement.

Applicant Signature: (Please save, print, sign and email or mail to LCEF, 4107 N. Adrian Hwy., Adrian, MI, 49221, email address: scholarships@lisd.us)

FOR LCEF STAFF ONLY -----

Date Received by LCEF: _____
Logged in by: _____

Approved by: _____
Date Approved: _____
Grant Amount Approved: _____
Date Applicant Notified: _____

Denied by: _____
Date Denied: _____
Reason Denied: _____
Date Applicant Notified: _____