

NEVADA NATIONAL GUARD TEXTBOOK REIMBURSEMENT APPLICATION

(SEE REVERSE FOR INSTRUCTIONS)

NRS 412.1435 provides for reimbursements to members of the Nevada National Guard for the cost of textbooks required for a course of study in which the member is enrolled at an institution with the University and Community College System of Nevada.

PART A - PERSONAL INFORMATION

1) Print Name (Last, First, MI):		2) Rank:	3) SSN:
4) Affiliation:		5) Unit/Squadron	
6) Mailing Address:	7) Home Phone:		
8) City, State, Zip	9) Work Phone:		
10) Email:	11) Cell Phone:		
12) Have you used the State Textbook Reimbursement Program before: ____ Yes ____ No			
13) Have you changed addresses since your last Textbook Reimbursement Application? ____ Yes ____ No ____ N/A			
13b) *** If you selected "Yes" in block 13, please complete attached change of address form***			
14) Total Credit Hours Enrolled:		15) Term:	16) Year:
17) College/University attended:			

PART B - EDUCATION INFORMATION

1) Class Title	2) Begin Date	3) End Date	4) Textbook Title	5) Textbook Cost
(See continuation sheet for additional listings)			6) Total Reimbursement Request =	

PART C - MEMBER CERTIFICATION

I certify that the above information is true and correct.

Member's Signature:	Date:
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PART D - UNIT REPRESENTATIVE CERTIFICATION

I hereby certify that this individual is currently a member of the Nevada National Guard, and I will notify the Nevada National Guard Education Office of any changes in this individual's status. I also certify that all required documentation is present and has been completed correctly, to the best of my knowledge, completed correctly.

Unit Full-Time Representative Printed Name:

Unit Representative Signature:	Date:
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PART E - BATTALION CARRER COUNSELOR CERTIFICATION

I hereby certify that this individual is currently a member of the Nevada National Guard, and I will notify the Nevada National Guard Education Office of any changes in this individual's status. I also certify that all required documentation is present and has been, to the best of my knowledge, completed correctly.

Battalion/Squadron Carreer Counselor Printed Name:

Battalion Carreer/Squadron Counselor Signature:	Date:
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PART F - CONTROL NUMBER MANAGER

I certify that all required documentation has been provided and is correct.

Education Services Manager Printed Name:

Education Services Manager Signature:	Date:
Control Number:	Date Issued:

FOR STATE ADMIN OFFICE USE ONLY

FOR STATE ADMIN OFFICE USE ONLY				SFY	PV		
Line #	Fund	Agency	Org	Appr Unit	Object	Control Number	Amount
Description: Textbook Reimbursement				P3	Date:	P4	Date:

Application Instructions

Listed below are detailed instructions on what documentation is required, how to fill out the documentation, and the order of which the submitted application should follow.

Part A	
Block 1:	LAST NAME, FIRST NAME MI
Block 2:	RANK/ GRADE
Block 3:	APPLICANT'S SOCIAL SECURITY NUMBER
Block 4:	AFFILIATION- Select "ARMY" if you are ARNG or "Air" if you are ANG
Block 5:	UNIT: List your current unit of assignment by name and include UIC
Blocks 6-11:	Fill in basic information to include address, work phone number, cell phone number and email address
Block 12:	Have you ever submitted a textbook reimbursement packet in the state of Nevada before? Annotate yes or no
Block 13:	If you have submitted a textbook reimbursement packet (per block 12) have you changed addresses since your last submission? Annotate "Yes" or "No"
Block 13b:	If you have changed your address since your last application submission, (per block 13) please complete the change of address form provided with this packet.
Block 14:	Total credit hours enrolled (how many credits are you taking this term). i.e. 3,6,9 etc
Block 15:	What term is this application for? Summer, Fall or Spring?
Block 16:	What year are you taking this course? (Please give the year that the semester begins).
Block 17:	Please select the College or University that you are attending from the given drop down options.

Part B	
Block 1:	Please give the class title for which the given textbook is required (i.e. English 101, Math 095, etc).
Blocks 2-3:	Give the dates that the class begins and ends. This should be roughly the same throughout the entire application.
Block 4:	Give the textbook required for the class given in Block 1 of Part B (i.e. ENG 101, 12 AUG 12- 15 JUN 13, Basic English Writing Styles, version 3
Block 5:	Give the amount paid for the required text listed in Block 4 of Part B. This total does not include shipping and handling. This must be the amount that the Soldier/Airman PAID for the book. Discounts and credited books will not be reimbursed the whole sale price, but will receive the amount paid for the required texts. Repeat Blocks 1-5 of Part B for all required textbooks purchased.
Block 6:	A grand total of all texts purchased should appear in this area automatically.

Part C	
In the correct space given, the Soldier/Airman and their chain of command will sign affirming that they have provided the following documentation:	
1)	Completed Application for Textbook Reimbursement with all required signatures.
2)	Copy of the course syllabus with required book list for each class taken.
3)	Original receipts for all textbooks purchased
4)	Unofficial transcript (must have "C" or better average per class)
5)	A completed State Vendor Registration Form
6)	A Voided check (address must match current address)
7)	If a voided check is not available, a company memorandum or bank print out listing Soldier's/Airman's account and routing number. The Soldier/Airman must sign this memorandum affirming that the information is correct.
8)	A change of address form (if applicable)

APPLICATIONS MUST BE EMAILED TO SOLDIER'S UNIT ADMINISTRATOR.

Spring Semester - (Needs to be in the State Admin Office Carson City NLT)	15 June
Summer Semester - (Needs to be in the State Admin Office Carson City NLT)	31 August
Fall Semester - (Needs to be in the State Admin Office Carson City NLT)	31 January

THERE IS NO GRACE PERIOD

Incomplete applications or applications received after the indicated deadline dates will not be considered.