

Important Clarification Regarding Aspire Tuition Waiver Eligibility and Program Requirements

We are aware of recent social media posts circulating incorrect information regarding the Aspire Tuition Waiver. To ensure accurate understanding, we would like to clarify the following key points:

- **Oklahoma Residency Requirement:** To qualify for the Aspire Tuition Waiver, applicants **must be residents of the state of Oklahoma**. Non-residents are not eligible for this funding.
- **Enrollment Is Not Guaranteed:** Participation in the Aspire Tuition Waiver program is subject to **meeting all eligibility criteria**. Immediate or automatic enrollment is **not guaranteed**.
- **Mandatory In-Person Attendance:** Students enrolled in Flex-Health/Fast-Track courses, such as Phlebotomy, Medical Assistant, Pharmacy Tech, EKG Tech, CNA, and similar programs, are **required to attend weekly in-person class hours**. Limited online opportunities may be available; however, remote or online participation does not substitute for scheduled in-person attendance.

We encourage all prospective students to verify program information through official sources to avoid misinformation and ensure a clear understanding of eligibility and requirements.



FRANCIS TUTTLE - FINANCIAL AID ASPIRE TUITION WAIVER APPLICATION

Academic Year

2024-2025

Students enrolled in any Career Training program, with the exception of Respiratory Care, may apply for the Aspire Tuition Waiver. **This tuition waiver applies to students who are Oklahoma residents and begin their program between July 1, 2024 and June 30, 2025.** Students may receive a tuition waiver for up to two programs, inclusive of the Next-Step Tuition Waiver. To establish eligibility, the student must meet one of the qualifications below. Contact the Francis Tuttle Financial Aid Office at (405) 717-4315 if you have questions.

STUDENT INFORMATION

Last Name	First Name	Middle I.	FTTC ID
Local Street Address	City	State	Zip Code
Social Security Number	Date of Birth	Email Address	Daytime Phone Number

INSTRUCTIONS

1. Complete all sections of this worksheet that apply to your situation in full. **Incomplete forms will be returned.**
2. Students must be Oklahoma residents.
3. Students must submit proof of their eligibility to the Financial Aid Office.
4. Indicate which qualification you believe you meet by checking **ONE** appropriate box below and supply the requested information.
5. Return the requested documents to the Financial Aid Office in person at the Rockwell Campus Center, Suite A1094, or mail them to Francis Tuttle Technology Center, Financial Aid Office, 12777 N Rockwell Ave, Oklahoma City, OK 73142.

NOTE: Due to imaging system requirements, photographs of documents are not acceptable.

SECTION A: MEANS-TESTED FEDERAL BENEFITS

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At any time in the last two years, you or someone in your household received Medicaid, Supplemental Security Income (SSI), Supplemental Nutrition Assistance Program (SNAP) benefits, Temporary Assistance for Needy Families (TANF), or Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). **Please submit documentation confirming eligibility for one of these benefits.**

SECTION B: ELIGIBLE STUDENT AID INDEX (SAI)

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You had a Student Aid Index (SAI) below 7395 calculated on the 2024-2025 FAFSA. **Your FAFSA application must be submitted and sent to Francis Tuttle with school code: 015702.** Francis Tuttle will review a copy of your FAFSA results. The Financial Aid Office will contact you if additional documentation is needed to verify the information on your FAFSA.

SECTION C: ELIGIBLE ADJUSTED GROSS INCOME (AGI)

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Your family's Adjusted Gross Income (AGI) on the 2023 Federal Income Tax Return (Form 1040) is below 275% of the 2023 Poverty Guidelines. Please list the people in your immediate household and refer to the chart on the back side of this form to determine if you are eligible. **You must provide the Financial Aid Office with a SIGNED copy of the 2023 Federal Income Tax Return for ANYONE in your household who was required to file.** To review your household's income, the Financial Aid Office may ask you to provide additional information if needed.

Last Name	First Name	Middle I.	FTTC ID
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SECTION C (CONTINUED): FAMILY INFORMATION *ATTACH A SEPARATE SHEET IF MORE SPACE IS REQUIRED

Write the names of the people who live at the student's address.
1. Include **yourself (the student)** on the first line.
2. Include the student's spouse, if the student is married.
3. Include **your parent(s)**:
 • *If your parent is remarried*, include the step-parent that lives in the household.
4. Include your **sibling's** if they are still living in the same household and will be living there through June 30, 2025.
5. Include **other dependents** that live in the household, and your parent(s) or spouse will continue to provide *more than half* of their support through June 30, 2025.
6. Write the Age of each household member.
7. Write the Relationship of each household member to the student in the chart below.
Write the 2023 Income for each household member, and if they were required to file a 2023 Federal Income Tax Return

Full Name of Household Member	Age	Student's Relationship to Household Member	2023 Income	Required to file a 2023 Federal Tax Return? (Y/N)
1.		Self		
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Refer to the chart below to determine if your family's AGI is below 275% of the 2023 Poverty Guidelines. You will need to turn in a **SIGNED** copy of the 2023 Federal Tax Return for any member of the household who was required to file a tax return. **If no one in the household filed a tax return, you must provide a Verification of Non-Filing Letter for you or the person who provides your support by going to [www.IRS.gov](https://www.irs.gov) and clicking on "Get Your Tax Record" in the Tools section.**

Family Size	2023 Poverty Guidelines	Max Pell Parent AGI Limit (175% of Poverty Guideline)	Min Pell Parent AGI Limit (275% of Poverty Guideline)
1	\$14,580	\$25,515	\$40,095
2	\$19,720	\$34,510	\$54,230
3	\$24,860	\$43,505	\$68,365
4	\$30,000	\$52,500	\$82,500
5	\$35,140	\$61,495	\$96,635
6	\$40,280	\$70,490	\$110,770
7	\$45,420	\$79,485	\$124,905
8	\$50,560	\$88,480	\$139,040

SECTION D: CERTIFICATION AND SIGNATURE

Certification: I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this Form. I understand that purposely providing false or misleading information on this Form may result in reduction or repayment of aid, fines and/or imprisonment in this and/or future years.

Student's Signature	Date form was signed
Print Student's Name	