



149 North Iowa Street, Dodgeville WI 53533 | skills@swcap.org | 608-935-2326 Ext 222

Skills Enhancement Education Grants

FOR WORKING ADULTS TUITION & SUPPORT

Average award: \$2,000 to \$4, 000 per year!

Applicants must:

- Be enrolled or considering enrollment in any career-approved course of study leading to increased wages and full-time employment after graduation.
- Maintain employment averaging 20 hours per week for eligibility.
- Reside in Iowa, Grant, Green, Richland, or Lafayette counties.

NURSE CAREERS: TUITION & SUPPORT

Tuition funding available: Up to \$20,000 and \$5,000 for approved school-related expenses.

Applicants must:

- Be enrolled or considering enrollment in the following Programs: Certified Nurse Assistant, Medical Assistant, First Year Nurse with LPN Certification, 2-year Associate Nurse, or BSN 4-year Nurse.
- Complete their program by June 30, 2025.
- Must reside in Iowa, Grant, Green, Richland, or Lafayette, counties.

For more information:

Fill out the interest form and return it to:

k.hohneke@swcap.org

608-935-2326 ext. 222

www.swcap.org/programs-services/education/skills-enhancement

This project has been financially supported, in part or whole, through the Wisconsin Community Action Program Association (WISCAP) with funding from the State of Wisconsin and the United Way of Iowa County.

Income Guidelines Apply



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Skills Enhancement Education Interest Form

Name (first, middle, last): _____

Date: _____ County of Residence: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: _____ Alternate Phone: _____

Email Address: _____

Birth Date: _____ Gender: _____ Marital Status: _____

Income Information

Job Title: _____ Hours per week: _____ Wage per hour: _____

How many people live in your household? _____ How many dependents do you support? _____

Does spouse have earned income? _____ Spouse's income: _____

Education Information

Are you currently enrolled in school? _____

If YES: Name of School: _____

Name of Program: _____ Expected Graduation Date: _____

If NO: Where do you plan to enroll: _____

Name of Program: _____ Expected Start Date: _____

What part of the Skills Enhancement Program is of interest to you? Check all that apply.

___ Assistance with transportation to/from school ___ Assistance with child care while taking classes

___ Assistance with educational costs for tuition, books, and fees

How did you hear about us? _____

RIGHTS UNDER TITLE VI

Southwestern Community Action Program, Inc.

- Southwestern Wisconsin Community Action Program, Inc., operates its programs and services without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with Southwestern Wisconsin Community Action Program, Inc.
- For more information on Southwestern Wisconsin Community Action Program, Inc.'s civil rights program and the procedures to file a complaint, contact 800-704-8555; email title.vi.complaint@swcap.org; or visit our administrative office at 149 N. Iowa St., Dodgeville, WI, 53533. For more information, visit www.swcap.org.
- A complainant may file a complaint directly with the Federal Transit Administration by filing a complaint with the Office of Civil Rights, Attention: Title VI Program Coordinator, East Building, 5th Floor-TCR, 1200 New Jersey Ave., SE Washington, DC, 20590.
- If information is needed in another language, contact 800-704-8555. Si se necesita información en otro idioma de contacto 800-704-8555.