

Application form for admission to training centerYear of 2022

Admissions to training center: guide for 2022 gives full details of the admission process together with information on individual AVPS training center. The easiest way to apply for a class is online located at https://www.avps-llc.com/enroll-now. You can download the application and email it to info@avps-llc.com when you are finished. Please also submit all documents requested in PDF form. If you need help or have questions, please call us at (505) 600 – 9280 or email us at info@avps-llc.com.

What to know about admissions into AVPS:

- Must be a member of any status of the United States armed forces as follows:
 - Active Reserve
 - Individual Ready Reserve (IRR)
 - Retired
 - Active Duty
 - National Guard
 - Veteran
 - o Other

Please ensure you have called and spoke to a staff member about current tuition rates.

- Must furnish one of the following:
 - A copy of page 4 DD214 with social security number redacted and a resume.
 - If you are currently active duty or other forms of United States military personnel, please fill out SECTION D Part 1.
 - o If you are a veteran and cannot locate your DD214, please fill out <u>SECTION D Part 2.</u>
- Three references, which include 2 professional and one personal.
- If you are requesting a tuition waiver, please fill out <u>SECTION E.</u>
 - What is a tuition waiver? You are eligible for a tuition waiver if you have departed the military (DD214 in hand) less than 1 year ago.
 - You may also be eligible for a tuition waiver based on several factors such as income, situation, and other means of need. Other tuition waivers will be determined during the interview.
 - What is the interview?
 - During candidate selection, we interview each individual and determine several factors of eligibility based on need, situation, and referrals.
- If your spouse/family member will be attending the spouse class when time permits, fill out <u>SECTION D</u> Part 3.
 - O What is the spouse class?
 - During our training, we invite spouses to join in a single class discussion designed to inform our significant others of various information.

Please contact us if you have any questions.

Please answer all questions to the best of your ability. If you cannot answer a question, feel free to contact us.

	Middle:		Last:		
Address:		City:	L		
State:	Zip:		DOB:	/	/
Position Officer Enlisted V	Varrant				
Branch of Service Navy Army Mai	rines Coast Gua	ard			
Status Active Retired Res	erve Veteran [Other			
Enter Date: / /	Exit Date: /	/ /			
Phone: () -	Email:				
Emergency Contact					
First Name:		Last Name:			
Phone:		Other Phor	ne Number:		_
Theater Vietnam Desert Storm Disabled Veteran	IraqAfgha	anistan			
SECTION B – ACADEMICS					
Yes No Name How I	ong have you been	attending the co	llege?		
	h 				
Level of education					

If you are not attending college, do you plan on enrolling in the future? Yes No
What area of the civilian sector are you interested in?
How many years of experience do you have in the area you are interested in? $\boxed{0-1} \boxed{1-5} \boxed{5-10} \boxed{10+}$
Do you have certifications from the military of the civilian sector? Yes No If yes, what are the certificates you hold?
Are you interested in switching careers to a new industry? Yes No
What industry are you interested switching to?
SECTION C – PROFESSIONAL
Current Employer
How many years have you been with current employer?
What industry is it in?
What industry is it in? Have you attached your resume? Yes No
Have you attached your resume?
Have you attached your resume? Yes No Do you need assistance writing a resume?

Do you know how to use Microsoft Office (Power Point, Excel, Word, etc.)? Yes No
Have you attended a job skill program for veterans or civilians? If so, which one? Yes No Name & Location?
Have you attended a transition program? Yes No
If yes, when and where did you attend?
Please tell us about your current job position and what you do on a daily basis there.
SECTION D – ACTIVE DUTY, OTHER, LOST DD214, & SPOUSE INFORMATION
*Note, if the question does not pertain to you, please skip them, and fill out what you are able to.
Section D → Part 1 (Active Duty)
Where are you stationed?
What is you MOS/Rate?
Do you need permission to attend this training, or do you need AVPS to write you a letter for attendance? Yes No
When are you thinking of separating?
Are you currently on terminal leave? Yes No

If yes, when does your terminal leave end?	
Have you attended a transition program yet? Yes No	
If no, do you plan on attending one and when?	
Please use the space below to list challenges you feel you	ou are currently facing
Section D →Part 2 (Lost DD214)	
To verify identity as a former military service member,	we need to obtain some information.
	e/. This website will provide you access to obtain a may also call them at (888) DFA – S411 to find out how eal for the Department of Defense and will be
Section D → Part 3 (Spouse)	
If your significant other will be attending the one class v	with you, please have them fill this out.
First Name:	Last Name:
Phoner Number:	Email:
DOB:	Relation:
Questions or concerns you would like to discuss. These	questions or concerns will remain private.

SECTION E - TUITION WAIVER

Tuition waivers are provided based on several factors determined by the screening process. These factors are subject to change at any point. If you are interested in applying for a tuition waiver, please fill out the information below. All information in this application including SECTION E is confidential. Are you a veteran who has been out of the military for less than a year? This also includes reserve members who have completed their 4 years and transferred to the reserves with a DD214 within one year. Yes No Household income of less than \$19,000 annually for one person? Yes No Household income of less than \$26,000 annually for a family of two? Yes Household income of less than \$32,000 annually for a family of three? Household income of less than \$39,000 annually for a family of four? Are you permanent and total? Yes No Are you TDIU? Yes No Anything you wish to discuss in person or by phone? Yes No Are you facing a hardship? Please explain below:

SECTION F – TRAINING PROGRAMS
If you need to review the program curriculum, please visit https://www.avps-llc.com/programs . If you need help choosing a program, please call us at (505) 600 – 9280.
Which training program are you applying to? KonVerge GovCon
How do you plan on paying for the program? Out of pocket Finance Other
Each program starts once per month and may last several months depending on the program. Which month do you plan on starting your program in 2022? April May June July August September October November December
Do you prefer in seat or online instruction? In seat Online
Have you been referred to a program by someone? If yes, who? Yes No If yes, who?
Additional comments or questions
This application is subject to change at and by the discretion of AVPS. This application does not constitute a binding agreement for any program or affiliates programs of AVPS or vendors contracted by American Veteran Professional Services LLC. Candidates accepted into a program will be contacted by an affiliate of AVPS as soon as time permits. Candidates not accepted will also be contacted by an affiliate within a reasonable time frame.
I certify that all information given in this application is complete and accurate to the best of my knowledge. If I am accepted as a student at American Veteran Professional Services LLC, I agree to conform and abide by the letter and spirit of all rules, regulations, and procedures of American Veteran Professional Services LLC. Misrepresentation in any statement by the applicant or failure to abide by AVPS academic regulations will be considered adequate grounds for denying admission, for cancellation of registration, or for suspension from the Program.

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