



**Northeast Technology Center (NTC)
Practical Nursing (PN) Program**

Thank you for the interest you have expressed in the PN Program. This information packet will assist you in making application for admission to the program. **Please pay attention to details and follow instructions carefully.** Return paperwork, as directed, to the appropriate campus.

This cover page is provided to help you in completing the information enclosed in the packet. Check off each item as you complete the following and **return all items together.**

Make sure that documentation is returned to the campus or your choice. The campus addresses are listed below. Claremore will only accept applications from January to April.

Afton Campus	Kansas Campus	Pryor Campus	Claremore Campus
19901 S. Hwy 69 P.O. Box 219 Afton, OK 74331 918-257-8324 Fax: 918-540-1111	Hwy 10 & Cherokee Turnpike P.O. Box 30 Kansas, OK 74347 918-868-3535 Fax: 918-868-3530	6195 W. Hwy 20 P.O. Box 825 Pryor, OK 74362 918-825-5555 Fax: 918-825-5513	1901 N. Hwy 88 Claremore, OK 74017 918-342-8066 Fax: 918-342-9066

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

A COMPLETE APPLICATION PACKET INCLUDES:

- (1) Completed Application for Admission
- (2) TABE Test Results
- (3) Official High School Transcript or
- (4) Official documentation of GED **scores** and **certificate**
- (5) Official college or Career Tech Nursing transcripts (if applicable)
- (6) Three character references
- (7) Copies of current state or national health certifications/registrations (if applicable)
- (8) Verification of English language competence (TOEFL) (if applicable)

The Northeast Technology Center Practical Nursing Program is accredited by the National League for Nursing Accrediting Commission Inc., 3343 Peachtree Road NE Suite 500, Atlanta, GA 30326, Phone: 404-975-5000; Fax: 404-975-5020. www.nlnac.org

The Northeast Technology Center Practical Nursing Program is accredited by the Oklahoma Department of Career and Technology Education, 1500 West Seventh Ave, Stillwater, OK 74074, Phone: 405-377-2000; Fax: 405-743-5541. www.okcareertech.org

The Northeast Technology Center Practical Nursing Program is approved by the Oklahoma Board of Nursing, 2915 N. Classen Blvd., Suite 524, Oklahoma City, OK 73106, Phone: 405-962-1800; Fax: 405-962-1821. www.state.ok.us/nursing

Northeast Technology Center is accredited by the Oklahoma State Department of Education, 2500 North Lincoln Boulevard, Oklahoma City, Oklahoma 73105-4599, Phone: 405-521-3301; Fax: 405-521-6205. www.sde.state.ok.us

**NORTHEAST TECHNOLOGY CENTER
SCHOOL OF PRACTICAL NURSING**

INSTRUCTIONS FOR PN APPLICATION FOR ADMISSION

- Step 1:** All applicants must be at least 18 years old when the program begins and have a high school diploma or GED.
- Step 2:** **COMPLETE** the application for admission. Applications for the Individualized Option Program (offered at Afton, Kansas, and Pryor) may be turned in at any time throughout the year to the PN Secretary at the campus of your choice. Applications for the Traditional Program (offered at Claremore) will be accepted January through May and must be turned submitted to the PN secretary. **ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED.**
- Step 3:** All applicants must **SCHEDULE** a date with the Adult Education Office to take the TABE entrance test before submitting the completed application packet. There is a testing fee of \$35 cash (non-refundable) payable at the time of scheduling. Please report to the testing office at least 15 minutes prior to the scheduled exam time. The test will take approximately 3 hours and includes Math, Reading, Language, Vocabulary, and Spelling. If you are not satisfied with your scores, a second TABE test may be rescheduled no sooner than 30 days after the original test date. A three month wait will be required (after the date of the second TABE test) before attempting the TABE test again.
- Step 4:** Return the **COMPLETED** application packet to the PN secretary at the campus of your choice.
A COMPLETE APPLICATION PACKET INCLUDES:
- a. TABE test results
 - b. Application for Admission
 - c. Three references (NTC reference forms are included in the packet)
 - d. Official High School Transcript or Official GED documentation with scores
 - A home school program must be approved to offer a high school diploma by the state board of education in the state in which it is based.
 - Transcripts granted by high schools outside of the United States must be evaluated by a credentialing agency in order to validate equivalency. Applicants may contact the World Education Services at www.wes.org or may check with local colleges and universities. NTC is not responsible for obtaining this evaluation. Applicants are responsible for obtaining the evaluation and are also responsible for any costs incurred.
 - An on-line high school program must be approved to offer a high school diploma by the state board of education in the state in which it is based.
 - e. Copies (if applicable) of current state or national health certifications. (CNA, CMA, EMT, CPR, etc.)
 - f. Official college transcripts (if applicable)
 - g. Official Career Tech nursing transcripts (if applicable)
 - h. **International Applicants:** Official TOEFL Total Scores: 530 on paper-based test or 197 on computer-based test.
- Step 5:** **International Applicants.** All international applicants (regardless of U.S. Citizenship) for whom English is a second language (English Language Learners – ELL) must present evidence of proficiency in the English language. A **TOEFL** test is required for admission in addition to taking the TABE. These tests are used to assess placement. You may obtain information about the test

by writing to: TOEFL, Box 899, Princeton, NJ 08541, U.S.A., or by accessing the TOEFL website, www.toefl.org. Submit a copy of your TOEFL results with your NTC PN Application Packet.

Note: The following exceptions apply to the English proficiency requirement:

Students from Australia, New Zealand, the British Isles, and the English speaking provinces of Canada are exempt.

Students who have earned a baccalaureate degree from a regionally accredited United States college or university and students who have earned a GED or a high school diploma from a United States high school with passing scores are exempt from having to take the TOEFL.

Step 6: Acceptance and enrollment will be **FINALIZED** when the applicant receives a telephone call from NTC offering a position in the PN Program. A packet will be mailed to the applicant (once enrollment has been verified) with a letter of conditional acceptance and documents containing additional requirements.

Note to INDIVIDUALIZED Option Applicants:

Meeting the stated requirements **DOES NOT GUARANTEE** admission to the PN program. The applicant will be notified by mail of placement into the applicant pool. The applicant's position in the applicant pool will move according to the score achieved by each additional applicant or any additional information the applicant adds to the application file. Admission to the PN Program will take place every other month, if an opening is available. Applicants with the highest scores will be called first to fill any program openings. If applicants decline a position in the PN Program, their applications will be removed from the applicant pool. The applicant will be required to submit a new application to return to the applicant pool. It is the applicant's responsibility to notify the PN Secretary of changes in phone numbers and addresses.

If the applicant makes no attempt to increase his/her score over a 12 month period the application will be removed from the applicant pool.

Note to TRADITIONAL Program Applicants:

Meeting the stated requirements **DOES NOT GUARANTEE** admission to the PN program. Completed applications will be accepted each January through April. Applications will be scored according to the ranking sheet. Applicants will be placed in an applicant pool according to score achieved. The twenty-two highest ranked applicants will be called to fill positions for the new school year. All other applications will be destroyed. If an applicant is not accepted they may apply again the following year. It is the applicant's responsibility to notify the PN Secretary of changes in phone numbers and addresses.

Incomplete applications will not be considered. It is the applicant's responsibility to submit all transcripts and other required documentation to the school in one complete packet.

Please call the **Afton Campus** 918-257-8324, the **Claremore Campus** 918-342-8066, the **Kansas Campus** 918-868-3535, or the **Pryor Campus** 918-825-5555 if you have any questions regarding the admission process.

**NORTHEAST TECHNOLOGY CENTER
SCHOOL OF PRACTICAL NURSING**

**IMMUNIZATION GUIDELINES
UPON FORMAL ACCEPTANCE IN THE PN PROGRAM
EACH STUDENT MUST PROVIDE ALL DOCUMENTATION**

IMMUNIZATION	DOCUMENTATION PROVIDING EVIDENCE OF IMMUNITY
<p>Tuberculin (TB) Purified Protein Derivative (PPD) skin test</p>	<ul style="list-style-type: none"> • Evidence of a negative tuberculin PPD test (must be done within the last 6 months) A current PPD TB skin test will be required every 12 months while in this program. <li style="text-align: center;">Or • If evidence exists of a positive Tuberculin skin test, you must provide documentation of: Negative chest x-ray results (within the past 6 months) A TB questionnaire will be required every 12 months while in this program.
<p>Rubella Titer</p>	<ul style="list-style-type: none"> • Evidence of a positive blood test indicating immunity. <li style="text-align: center;">Or • If evidence shows non-immunity, must provide documentation of 2 doses of MMR, 4 weeks apart.
<p>Varicella Titer</p>	<ul style="list-style-type: none"> • Evidence of a positive blood test indicating immunity. <li style="text-align: center;">Or • If evidence shows non-immunity, must provide documentation of two doses of the Varicella vaccine given at least 28 days apart.
<p>Tetanus (Td, Tdap)</p>	<ul style="list-style-type: none"> • Evidence of current tetanus immunization (within the last 10 years).
<p>Hepatitis A (HAV) and Hepatitis B (HBV)</p>	<ul style="list-style-type: none"> • Documentation of immunity by either: • Evidence of injections (3 for Hepatitis B and 2 for Hepatitis A) given over a 6 month period. <li style="text-align: center;">Or • Evidence of a positive blood tests indicating immunity for HAV & HBV. <li style="text-align: center;">Or • Completion of a waiver indicating the student's unwillingness to be vaccinated for HAV or HBV.
<p>CPR</p>	<ul style="list-style-type: none"> • American Heart Association HealthCare Provider Cardiopulmonary Resuscitation (CPR) Course The CPR certification must be valid for the entire length of the program.
<p>Students who suspect that they may be pregnant must consult a physician regarding the advisability of immunization against Varicella, Hepatitis A and Hepatitis B.</p>	

Failure to obtain required documentation on or before the 30 day and/or 60 day timeframe, and/or prior to the first scheduled day of clinical will result in 1, 2 or 3 breaches and/or dismissal from the program.

NORTHEAST TECHNOLOGY CENTER - PRACTICAL NURSING PROGRAM ADMISSION RANKING SCALE

Approved 10/07, 9/09
Revised 10/08, 8/09

Applicant Name: _____

The Applicant can increase his/her score following placement in the PN Program Pool by submitting proper documentation.

Applicant File			
Application <input type="checkbox"/> Official HS Transcript <input type="checkbox"/> or GED Transcript <input type="checkbox"/>		File Complete	
Reference Forms 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> TOEFL (if applicable) <input type="checkbox"/> College Transcript (if applicable) <input type="checkbox"/>		TAFE	
I. Health Care Experience (Must be actual patient care)			
		11 yrs. – 15+ yrs.	4
		6 yrs. – 10 yrs.	3
		7 mos. – 5 yrs.	2
		1 day – 6 mos.	1
II. Current Health Care Certification (State or National)			
			2
		A.A.	2
		M.T.	2
		American CPR	2
			2
		Other	2
III. Health Education			
		CC/ Medical	2
		Emergency (45 hrs)	
		CNHC Nursing Concepts(40 hrs)	2
IV. Entrance Test			
READING		12.0 – 12.9	6
		11.0 – 11.9	5
		10.0 – 10.9	4
MATH		12.0 – 12.9	6
		11.0 – 11.9	5
		10.0 – 10.9	4
V. High School Transcript			
GPA		3.5 – 4.0	4
		3.0 – 3.49	3
		2.5 – 2.99	2
VI. GED			
Met after 2002		712 – 800	4
		624 – 711	3
		536 – 623	2
VII. GED			
Met prior to 2002		360 – 400	4
		320 – 359	3
		280 – 319	2
VIII. Official College Transcript (Credit hrs earned with "C" or greater)			
		120 hrs +	4
		90 hrs – 119 hrs	3
		60 hrs – 89 hrs	2
		30 hrs – 59 hrs	1
IX. CareerTech Official Transcript in Nursing (Credit hrs earned with "C" or greater)			
		Level 3 (467 – 732)	6
		Level 2 (234 – 466)	5
		Level 1 (30 – 233)	4
X. TOTAL POINTS			



PRACTICAL NURSING (PN) APPLICATION
Northeast Technology Center
www.netech.edu



For Office Use Only
 Date Received: _____
 By: _____

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.
COMPLETE APPLICATIONS MAY BE SUBMITTED TO THE NURSING SECRETARY

Name: _____
 (First) (Middle No Initials) (Last) (Maiden-if applicable)

Mailing Address: _____
 (Street, Route, or Box No.) (City) (State) (Zip)

Telephone: _____
 (Area Code and Number) (Cell Phone Number)

Social Security Number: _____ E-Mail Address _____

PERSON TO CONTACT IN CASE OF EMERGENCY.

Name: _____

Mailing Address: _____ Telephone: _____

EDUCATION

Date of High School Graduation: _____ Name and Address of High School: _____

Date of GED: _____ If you did not graduate, what is the highest grade you completed: 8 9 10 11
(Official High School Transcript or Official GED Documentation Must Be Submitted with Application)

Name and address of college attended: _____

College years completed (circle one): 1 2 3 4 **(Official College Transcript Required to Receive Ranking Points)**

Will you be requesting Financial Assistance? Yes No

If yes, please contact the Financial Aid Office for information.

Have you previously applied for admission to the NTC Nursing Program: Yes No

If yes, campus and year: _____

Were you previously enrolled in another nursing program? Yes No

If yes, name of school and year: _____

HEALTH CAREERS CERTIFICATION (HCC)

Are you currently enrolled in an HCC or Adult Education Program at NTC? Yes / No

Are you currently enrolled in the "Pre-Nursing" pathway in a HCC Program? Yes / No

Have you completed an HCC Program at NTC within the last two years? Yes / No

Are you a CNA with a **CURRENT** certificate? If yes, attach a copy of proof of current certification. Yes / No

Effective November 1, 2007, applicants for licensure/certification by examination or endorsement, for reinstatement, and for renewal must provide verification of citizenship or qualified alien status as a requirement for licensure. HB 1804, The Oklahoma Taxpayer and Citizen Protection Act of 2007, requires all state agencies to cooperate with federal immigration authorities in the enforcement of federal immigration laws. Questions about your immigration status should be directed to the Bureau of Citizenship and Immigration Services (BCIS) at 1-800-375-5283

Please check the appropriate box below to indicate your citizenship status:

- I am a U.S. citizen
- I am U.S. national
- I am a legal permanent resident alien
- I am a qualified alien

EMPLOYMENT: Begin with current employer. Be sure to include start and ending dates. Include an additional if needed.

Employer: _____ Address: _____ Phone: _____

Position Held: _____ From: _____ To: _____

Name and Title of Supervisor: _____

Reason for Leaving: _____

Employer: _____ Address: _____ Phone: _____

Position Held: _____ From: _____ To: _____

Name and Title of Supervisor: _____

Reason for Leaving: _____

Employer: _____ Address: _____ Phone: _____

Position Held: _____ From: _____ To: _____

Name and Title of Supervisor: _____

Reason for Leaving: _____

CRIMINAL HISTORY AND IMPORTANT INFORMATION from the OKLAHOMA BOARD OF NURSING

Effective November 1, 2003, a candidate for a license to practice as a registered nurse or licensed practical nurse shall submit to the Oklahoma Board of Nursing "certified written evidence that the applicant has never been convicted in this state, the United States or another state of any felony, unless five (5) years have elapsed since the date of the criminal conviction or the termination of any probation or other requirements imposed on the applicant by the sentencing court, whichever shall last occur, or a presidential or gubernatorial pardon for the criminal offense has been received" [59 O.S. §567.5]. Therefore, applicants for licensure in Oklahoma with one or more felony convictions cannot apply for licensure for at least five years after completion of all sentencing terms, including probation and suspended sentences, unless a presidential or gubernatorial pardon is received.

THE FOLLOWING INFORMATION IS REQUIRED BY THE OKLAHOMA BOARD OF NURSING FOR ALL APPLICANTS SEEKING ADMISSION INTO THE NURSING PROFESSION.

1. Have you ever been arrested for any offense in any state, territory, or country, including expunged offenses, with the exception of minor traffic violations? (Minor traffic violations do not include DUI.)	YES <input type="checkbox"/> NO <input type="checkbox"/>
2. Have you ever been convicted of any offense in any state, territory, or country, including expunged offenses, with the exception of minor traffic violations?	YES <input type="checkbox"/> NO <input type="checkbox"/>
3. Have you ever received a deferred sentence for any offense in any state, territory or country, including expunged offenses?	YES <input type="checkbox"/> NO <input type="checkbox"/>
4. Have you ever been convicted of a felony in any state, territory, or country?	YES <input type="checkbox"/> NO <input type="checkbox"/>
5. Have you ever had disciplinary action taken against your nursing license or certificate; any health-related license or certificate; or any application for a nursing or health-related license or certificate in any state, territory or country?	YES <input type="checkbox"/> NO <input type="checkbox"/>
6. Have you ever been judicially declared incompetent in any state, territory, or country?	YES <input type="checkbox"/> NO <input type="checkbox"/>

If you answered "yes" to question #1, #2, #3 or #4:	Please submit a letter of description and certified copies of Information Sheet, Charges, Judgment and Sentence, or a certified copy of the Order of Expungement.
If you answered "yes" to question #5:	Please submit a letter of description and certified copies of the charges/complaints, findings of fact, and orders to the Board.
If you answered "yes" to question #6:	Please submit a letter of description and a certified copy of the Court Order.

STATEMENT OF UNDERSTANDING

- I understand NTC may disclose educational and other information to prospective employers.
- I understand NTC may use my picture for publication and/or educational purposes. I understand that I will not be compensated in any manner for this use.
- I understand NTC **does not** carry Accident Insurance on students. This verifies I have insurance to my satisfaction and do hereby release the teacher and the school of liability because of accident or injury. I also give permission to the school officials to secure emergency medical treatment from qualified personnel, and I assume full responsibility for payment of such treatment.
- I understand an Oklahoma State Bureau of Investigation (OSBI) background check is required upon acceptance into the NTC PN program. (OSBI checks are not required until acceptance has been verified.) I understand my OSBI Background check results may be shared with any clinical facilities that may be utilized during my education.
- I understand that NTC complies with the Oklahoma Board of Nursing relative to felony convictions and application for licensure. (Refer to "Criminal History" section above.) Based upon a history of arrest and/or convictions, students may be unable to perform clinical at certain facilities which may hinder or prevent their ability to complete the program.
- I hereby certify that all statements in this Application for Admission are true and correct to the best of my knowledge. I understand if I am admitted to the program, false statements on this application shall be considered sufficient and appropriate cause for dismissal.

Printed Name of Applicant

Signature of Applicant

Date

Northeast Technology Center does not discriminate on the basis of race, color, national origin, sex, age, disability, religion or veteran status in its educational programs or activities. This includes, but is not limited to recruitment, admissions, educational services and activities, financial aid, and employment. Inquiries concerning application of this policy may be referred to Roger Crutchfield, Deputy Superintendent/Compliance Coordinator, Northeast Technology Center, RR3 Airport Road, P.O. Box 487, Pryor, OK 74362, or by phone at 918-825-7040.

OKLAHOMA BOARD OF NURSING LICENSURE GUIDELINES

The Northeast Technology Center (NTC) Practical Nursing Program (PN Program) is approved by the Oklahoma Board of Nursing (OBN). Graduates of this state-approved program are eligible to apply to write the National Council Licensure Examination (NCLEX) for practical nurses. Applicants for Oklahoma licensure must meet all state and federal requirements to hold an Oklahoma license to practice nursing. In addition to completing a state-approved nursing education program that meets educational requirements and successfully passing the licensure examination, requirements include submission of an application for licensure, a criminal history records search, and evidence of citizenship or qualified alien status. Applicants for practical nurse licensure must also hold a high school diploma or a graduate equivalency degree (G.E.D.) [59 O.S. §567.5 & 567.6]. To be granted a license, an applicant must have the legal right to be in the United States (United States Code Chapter 8, Section 1621). In addition, Oklahoma law only allows a license to be issued to U.S. citizens, U.S. nationals, and legal permanent resident aliens. Other qualified aliens may be issued a temporary license that is valid until the expiration of their visa status, or if there is no expiration date, for one year.

Applicants who are qualified aliens must present, in person, valid documentary evidence of:

1. A valid, unexpired immigrant or nonimmigrant visa status for admission into the United States;
2. A pending or approved application for asylum in the United States;
3. Admission into the United States in refugee status;
4. A pending or approved application for temporary protected status in the United States;
5. Approved deferred action status; or
6. A pending application for adjustment of status to legal permanent resident status or conditional resident status.

The Oklahoma Board of Nursing has the right to deny a license to an individual with a history of criminal background, disciplinary action on another health-related license or certification, or judicial declaration of mental incompetence [59 O.S. §567.8]. These cases are considered on an individual basis at the time application for licensure is made, with the exception of felony charges. An individual with a felony conviction cannot apply for licensure for at least five years after completion of all sentencing terms, including probation and suspended sentences, unless a presidential or gubernatorial pardon is received [59 O.S. §567.5 & 567.6].

**NORTHEAST TECHNOLOGY CENTER
DIVISION OF PRACTICAL NURSING
REFERENCE FORM**

8/09

Applicant must turn in reference form with application (Cannot be filled out by a relative or clergyman)

Your name has been given to us as a reference by:

_____ (Applicant's Name)

Please complete and return this form.

I have known the applicant: 6 mo. – 1 yr. 1 – yrs. 2 yrs. Longer

In what relationship have you known this applicant?

Please circle the degree to which the applicant possess the following qualities or characteristics that you believe would contribute to his/her success as a practical nurse.

1 = Non Existent	2 = Below Average	3 = Average	4 = Above Average	5 = Excellent
DEPENDABILITY (Good Attendance, Punctual)	1	2	3	4 5
INTEGRITY (Loyal, Honest, Respects Privileged Information)	1	2	3	4 5
RELATIONS WITH CO-WORKERS (Tactful, Cooperative)	1	2	3	4 5
ADAPTABILITY TO NEW OR STRESSFUL SITUATIONS	1	2	3	4 5
RESPONSIBILITY FOR SAFE PERFORMANCE OF DUTIES	1	2	3	4 5
ACCEPTS CRITICISM & SUGGESTIONS GRACIOUSLY	1	2	3	4 5
PERSONAL APPEARANCE (Good Personal Hygiene, Appropriate Dress)	1	2	3	4 5
ENJOYS PEOPLE (Patient, Kind, Considerate)	1	2	3	4 5
TEMPERAMENT (Copes with Minor Adverse Situations, Remains Calm)	1	2	3	4 5
DEMONSTRATES ENTHUSIASM (Seeks Improvement)	1	2	3	4 5
ABILITY TO SHARE IN ANOTHER'S EMOTIONS OR FEELINGS (To Understand Better)	1	2	3	4 5

Additional Comments: _____

Signature & Title of Person Giving Reference

Date

Place of Business

Address

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ACCEPTS CRITICISM & SUGGESTIONS GRACIOUSLY	1	2	3	4	5
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ACCEPTS CRITICISM & SUGGESTIONS GRACIOUSLY	1	2	3	4	5
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ENJOYS PEOPLE (Patient, Kind, Considerate)	1	2	3	4	5
TEMPERAMENT (Copes with Minor Adverse Situations, Remains Calm)	1	2	3	4	5
DEMONSTRATES ENTHUSIASM (Seeks Improvement)	1	2	3	4	5
ABILITY TO SHARE IN ANOTHER'S EMOTIONS OR FEELINGS (To Understand Better)	1	2	3	4	5

Additional Comments:

Signature & Title of Person Giving Reference

Date

Place of Business

Address

MEMO

TO: Practical Nursing Applicant

FROM: Lavonne Reavis, Financial Aid Officer

SUBJECT: FINANCIAL AID AT NORTHEAST TECHNOLOGY CENTER

Date: August 10, 2009

A free application is available on-line to apply for the Federal Pell Grant (FAFSA). When you apply for the Pell Grant online, your information is sent to the Oklahoma state level. This information is used to see if you might qualify for OTAG (Oklahoma Tuition Aid Grant). SEOG (Student Education Opportunity Grant) funds are automatically granted to those who qualify. You should complete the FAFSA application as soon as possible due to limited funds in some of the programs. Please apply even if you think you will not be eligible. Most scholarships are based on information provided on the Federal Application. Other outside agencies such as WIA, Cherokee Nation, Vocational Rehabilitation Services, etc., request that you apply for the Federal Pell Grant, and submit proof of acceptance or denial before awarding any of their funds.

- The grants range from \$200 to \$5,350
- The amount is based on the calculations done by the U.S. Department of Education from the information you provide on the Federal application.

The Department of Education requires applicants to apply online. The web site is www.fafsa.ed.gov. Directions are given to walk you through the process. If you do not have on-line access, you may come to the Financial Aid Office and use a computer for applying. The applicant will need his/her income tax return for information requested when he/she applies.

Northeast Technology Center does not participate in any loan programs.

FINANCIAL AID RESOURCE GUIDE

FEDERAL

Supplemental Education Opportunity Grants (SEOG)
Oklahoma Tuition Aid Grant
Northeast Technology Centers
Federal Pell Grant www.fafsa.ed.gov to apply online

Lavonne Reavis, Financial Aid Officer

District Wide 1-918-825-5555
P.O. Box 825 1-888-832-7988
Pryor, OK 74362-0825
E-mail: lavonne.reavis@netech.edu

Dedra Edwards, Financial Aid Support

Kansas Campus 1-918-868-3535
1-877-868-3535

Becky Steeber, Financial Aid Support

Pryor Campus 1-918-825-5555
1-888-832-7988

Tina Pitcher, Financial Aid Support

Afton Campus 1-888-513-2378
1-918-257-8324

Annette Barker, Financial Aid Support

Claremore Campus 1-918-342-8066

INTERTRIBAL COUNCIL INC.

Helen Christie

21 Eight Tribe Trail
P.O. Box 1308
Miami, OK 74355-1308
Phone: 918-542-4486
Fax: 918-542-2500

CHEROKEE NATION TRIBAL SERVICES

Main Office

P.O. Box 948
Tahlequah, OK 74464
Toll Free: 1-800-256-0671, Ext. 2300
Fax: 918-458-6195

Education & Employment Services

P.O. Box 948
Tahlequah, OK 74464
Phone: 800-256-0671, ext. 2342
Fax: 918-458-6165

Vikki Crowder Jackson

P.O. Box 1571
Jay, OK 74346
Phone: 918-253-3243
Fax: 918-253-8383

Nettie Detherage

900 W. McNellis
Vinita, OK 74301
918-256-8595

Roy Tidwell/Emma Gipson

P.O. Box 913
Stilwell, OK 74960
Phone: 918-696-3124
Fax: 918-696-4151

VETERANS ADMINISTRATION

Regional Office

P.O. Box 8888
125 S. Main
Muskogee, OK 74401
Toll Free: 1-800-827-1000

G.I. Bill Benefits Website:

www.gibill.va.gov and click on Ask a Question.

Veterans can apply for financial aid through any Northeast Technology Center Campus by going to the Financial Aid Dept.

OKLAHOMA WORKFORCE IN ACTION

Main Office

104 Hester Place
Chelsea, OK 74016
Phone: 918-789-5566

Mayes County

Paula Denny 918-825-2582, x17
Nikki James 918-825-2582, x16

Ottawa County

Stacy Cole or Kristi Fritz
121 North Main
Miami, OK 74354
Phone: 918-540-1806

Delaware County**Christy Sherman**

P.O. Box 169
Jay, OK 74346
Phone: 918-253-8516
Fax: 918-253-2504

Sally Walker

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Debbie Long

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Mari Vought

P.O. Box 238
(1626 8th St. Southgate Center)
Mathias Plaza, Suite 9
Rogers, AR 72757
Phone: 479-636-4755
Fax: 479-621-0322

Rogers County**Gloria Owen**

1810 No. Sioux St.
Claremore, OK 74017
Phone: 918-343-2536

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Susan Allen

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HOUSING AUTHORITY

Rogan Noble

206 E. Allen Road
Tahlequah, OK 74464
Phone: 918-453-2913
Fax: 918-458-5655

- **PHYSICIANS MANPOWER SCHOLARSHIP APPLICATIONS AVAILABLE AT ALL NORTHEAST TECHNOLOGY CENTER CAMPUSES. DEADLINE IS JUNE 27.**
- **STUDENTS MAY APPLY FOR ONE OR MORE OF THE FINANCIAL AID RESOURCES AVAILABLE**