



EDUCATION AND TRAINING VOUCHER (ETV) PROGRAM

ETV Spending Plan

NAME	ETV AWARD AMOUNT FOR QUARTER OR SEMESTER	DATE
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Instructions: Please look over the categories and indicate how you plan to spend your ETV funds. Your total expenses need to match your ETV award indicated above.

Education Related Expenses	Per Quarter or Semester		
Tuition and fees			
Housing (on campus)			
Meal plan			
Books			
Equipment / school supplies			
Computer / printer			
Tutoring			
Study abroad / internships			
Other (specify):			
Living Expenses	Per Quarter or Semester		
Rent (off campus)			
Groceries			
Utilities			
Phone			
Cable / Internet			
Gas			
Personal care / hygiene			
Child care			
Auto insurance			
Maintenance / repairs			
Transportation / parking			
Out-of-state travel			
Other (specify):			
Total School Expenses:	\$0.00	Grand Total of all Expenses:	\$0.00
Total Living Expenses:	\$0.00		

By signing and submitting this form, I agree that the funds will be used as stated above.

STUDENT SIGNATURE	DATE	ETV STAFF SIGNATURE	DATE
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Return by mail to:

The Education and Training Voucher (ETV) Program
 PO Box 45710
 Olympia WA 98504-5710

OR return by email to:

etvwash@dcyf.wa.gov