



Name: _____ **State ID # (SID):** _____

American Job Center: _____ **Petition Number:** _____

If my TRA benefits exhaust prior to the completion of TAA approved training or I am not eligible to receive TRA benefits, my means of financial support to complete training will be through any of the following source.

Please check all that apply.

- Financial Aid
- Grants
- Full-Time or Part-Time Employment
- Relatives
- Spouse
- Disability Funds
- Supplemental Security Income (SSI)
- Investments
- Real Estate Properties
- Pension
- 401K
- Savings
- Student Loans

Other (explain)

Worker's Signature _____

Date _____

TAA Representative's Name _____

TAA Representative's Signature _____

Date _____