OVERVIEW

The Cooperative Ministry's Career Improvement Program aims to reduce barriers to better employment. The target audience is underemployed and unemployed adults who wish to enhance their qualifications for jobs. Assistance is provided in the form of financial help to reduce barriers to job progression, such as the lack of necessary credentials or tools. The program may also assist with costs for exams leading to a high-school equivalency credential and expungement of a criminal record.

INITIAL REQUIREMENTS

Primary criteria for receiving assistance:

- Live at or below 80% of the Area Median Income as determined by the Department of Housing and Urban Development.

Family Size	2024-25 Area Median Income (80%)
Individual	$48,650
2	$55,600
3	$62,550
4	$69,500
5	$75,100
6	$80,650
7	$86,200
8	$91,750

- Head of Household
- At least 18 years old
- Relatively stable (not currently homeless, you rent or own home/apartment)
- Currently enrolled, or planning to enroll in GED training, or training that leads to a job certification. Must be within six months of completion.
- Or, first-time offender with drug charges, juvenile offenses, or first offense convictions with a penalty of not more that $500 or 30 days in jail. (Final determination of offenses eligible for expungement is done by the Solicitors office)

Mail or email this application to:
The Cooperative Ministry
3821 W. Beltline Blvd.
Columbia, SC 29204
ACounts@coopmin.org

What type of financial assistance are you applying for? (Check one):

GED ☐   Job Certification ☐   Expungement ☐

CONTACT INFORMATION	
Name (Last, First):	Date of Birth:
Street Address:	Apt / Lot #
City:	Zip Code:
Race (circle) White Black/African Amer. Amer. Indian/Alsakan Native Asian Hawaiian	
Cell Phone:	Home Phone:
Place of Employment:	Work Phone:
E-mail Address:	
Preferred Method of Contact/ Best Time	

BACKGROUND INFORMATION (for GED or Certification Help)
1) List skills, qualifications, and / or training you have acquired from employment, education.
2) Are you currently licensed or certified in a skill / job?   ☐ Yes   ☐ No If yes, please list certification and date received.
3) If you are seeking help with a GED, are you enrolled in a study program?   ☐ Yes   ☐ No If yes, name the program or education center you are enrolled in.
4) Please list your job goals.

5) Do you hold the type of job where certain skills or certifications are required for advancement or more wages? ☐ Yes ☐ No If yes, list the skills or certifications.
6) If you are seeking a job certification, please identify the certification and state whether you are already enrolled in a training program.

BACKGROUND INFORMATION (for Expungement)
In South Carolina, only certain types of minor, first time offenses can be expunged.

7) List offenses for which you are seeking expungement.

OTHER INFORMATION

Please list all the adults living in the household	Name	DOB
Please list each child living in the household	Name	DOB
How did you hear about this Program at The Cooperative Ministry?		

Authorization and Agreement by Applicant

I certify the information I have provided on this application for assistance is true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application may result in rejection of my application.
I understand that eligibility for the Career Improvement Program is determined in part from my address, school, employment, and income. I consent to The Cooperative Ministry contacting my landlord/mortgage holder, school, employer, and benefit provider, as applicable and needed to verify my eligibility.
I understand I will be contacted by The Cooperative Ministry to provide outcome information, i.e., exam results and changes in income as a result of participation in the Program.
Signature of Applicant   Date