



U.S. Department of Defense

my Career
Advancement
Account



ETP Template

SPOUSE EDUCATION AND CAREER OPPORTUNITIES • MY CAREER ADVANCEMENT ACCOUNT SCHOLARSHIP

Education and Training Plan

Prior to requesting financial assistance from the My Career Advancement Account Scholarship, schools, organizations and military spouses are required to work together to develop an Education and Training Plan (ETP). The spouse must upload the plan in PDF format to their MyCAA account for review before any funding can be approved. Spouse Education and Career Opportunities program staff will review the ETP to ensure it contains coursework required for the spouse's training and education goals and will lead to employment in their chosen career field. Decisions on the approval or disapproval of this plan can take up to 14 business days and may require the spouse to consult with a SECO career coach.

Student Information

Student Name:

School Information

Name Including Campus:

Street Address:

City, State, ZIP Code:

School Website URL:

Program & Type of Education OR Training Being Funded

ASSOCIATE DEGREE	Program/Degree Name:		
	Course Catalog Link:		
	Tuition Cost (Per Credit Hour):		
	Total Tuition Cost:		
	Program Start Date:		
	Estimated Completion Date:		
	List all courses for up to two semesters. Include electives chosen.		
	Course Code	Course Title	Number and Type of Hours

CERTIFICATION, LICENSE, CEU		Program Name	Name of Certification or License and Credentialing Body
	Certification		
	License		
	CEU		
	Exam Voucher Included	Yes No	
	Externship — if included, provide details of the externship and any responsibilities the spouse has in the externship process. Example: spouse is required to reach out to a provider from this list of partners in their area to obtain the externship.		
	Total Tuition Cost:		
	Program Start Date:		
	Estimated Completion Date:		

Program/Degree Overview:

School Official Verification

By my signature below, I certify the above information is true, accurate, complete and being submitted on behalf of the institution named in this document.

Signature of Authorized School Official

Date

Printed First Name, Last Name

Email

Title

Phone Number

Education and Training Plan Guidance

Education and Training Plan Completion Instructions:

NOTE: This document must be completed by a school official.

Before entering data into the ETP template, it is recommended that the template be saved as an original and that a copy is used for data entry. The completed form must be provided to the student in PDF format.

STUDENT INFORMATION

Enter student's name exactly as registered in the Defense Enrollment Eligibility Reporting System.

SCHOOL INFORMATION

Enter the school name, including the campus, full address and website of the school the student will attend. All school information should match the information contained in the Academic Institution Portal.

PROGRAM AND TYPE OF EDUCATION OR TRAINING BEING FUNDED:

1. Complete the applicable section for an associate degree, certification, license or CEUs.
2. For associate degree plans: List all courses for the next two semesters including electives. If there is only one semester left, please list that one semester's courses, including electives chosen.
 - a. A course code for each course must be listed along with the course title to be considered for approval.
Example of subject = ENG for English
Example of number = 1001
3. For Certification, License or CEU plans:
 - a. List a single program name, credential (license or certification) and credentialing body.
4. Complete the Externship section if applicable.

NOTE: The MyCAA Scholarship will pay for a maximum of nine hours of remedial coursework. The courses must be listed on the plan along with a separate document stating the student must take the courses.

TUITION COST

Include course tuition only and exclude fees of any kind such as book, supply, equipment, uniform, computer and electronic device fees. Associate degree tuition should be a per credit cost.

PROGRAM/DEGREE START DATE

Enter the date the student will attend first program or degree course (even if in the past for associate degrees) stated as day, month and year. Example date: January 16, 2024.

ESTIMATED PROGRAM/DEGREE COMPLETION DATE

Include the date student is anticipated to complete program or degree coursework stated as day, month and year. Example date: December 15, 2026.

PROGRAM/DEGREE OVERVIEW

Enter a complete program or degree overview including any specific information required according to guidance below.

SCHOOL OFFICIAL CERTIFICATION

The ETP must be generated by an authorized school official. Authorized individuals are determined by the school. The school official must sign the document attesting to the validity of the information presented in the document.

Additional Guidance by Program Type:

ASSOCIATE DEGREES

1. Only courses leading to an associate degree will be accepted.
2. The duration of an associate degree course cannot exceed 12 months.

LICENSES/CERTIFICATIONS

1. The name of the license or certification and certifying agency must be listed on the document (e.g. Licensed Practical Nurse (LPN) - Virginia Board of Nursing).
2. The credential must be needed for employment.
3. All "self-paced" programs will need to clearly list the longest recommended duration for completion on the document.
4. The duration of a license or certification program cannot exceed 18 months.

NOTE: Spouses will receive a notice through their MyCAA account when their plan has been approved or deferred. Notification may take up to 14 business days. Each spouse must request MyCAA financial assistance on a course-by-course basis after the ETP is approved and course start or end dates are known. Financial assistance must be requested no more than 60 days prior to the course start date but must be requested at least one day prior to course start date.