DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

STUDENT STIPEND AGREEMENT (AMENDMENT)

OMB Control No. 1660-0100 Expires: 08/31/2023

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 2 minutes. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472-3172, Paperwork Reduction Project (1660-0100) **NOTE: Do not send your completed form to this address.**

Privacy Act Statement

General: This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 31, 1974, for individuals applying for student stipend reimbursement from the Federal Emergency Management Agency.

Authorities: Public Law 93-498, 15 U.S.C. 2206, 5 U.S.C. 301, 50 U.S.C. APP. 2253, E.O. 12127 and E.O. 12148, Public Law 81-920, section 201(e), Public Law 93-288, section 201(e), and Public Law 104-134.

Purposes and Uses: The purpose of the information requested on this document and any supporting documents is to facilitate the review, approval, accounting, and reimbursement of funds for the expense of student attendance at the National Emergency Training Center (NETC), the Mount Weather Emergency Assistance Center (MWEAC), or selected off campus locations.

	nission of the information is voluntary; ho ement claim.		requested infor	rmation may result in a
STUDENT'S NAME (Last, first, mi		BUSINESS PHONE (Include area code)		
MAILING ADDRESS				
·	approved for the above named individua		r total actual tra	Actual verified travel vel cost. All other
providence of the original expense of	STUDENT CER	TIFICATION		
\$, and	from my home to NETC, MWEAC, or oth d I request reimbursement of that amoun within 60 days of start of course or my c	t. Attached is documentary		•
STUDENT'S SIGNATURE				DATE
	DO NOT WRITE BELOW THIS LIN	E - FOR OFFICIAL USE ON	NLY	
ACCOUNTING INFORMATION: Initial Stipend: Obligated This Agreement: Total Obligation:				
	APPRO	VAL		
☐ RECOMMENDED [☐ NOT RECOMMENDED	APPROVED		DISAPPROVED
Signature	 Date	Signatu	ıre	Date