

# Student Support Services

## Program Application



TRIO Student Support Services is a federally funded program that provides comprehensive support and individualized academic services to eligible students.

TRIO serves to motivate students to achieve their educational and career goals.

Please fill out the application below as completely & accurately as possible to determine your eligibility to participate.

### Applicant Information

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Current Age: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Carteret CC Email: \_\_\_\_\_ Alternate Email: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Preferred Method of Contact: Email Text Phone Call Mail

### Demographic Information

<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Citizenship</b> <i>Are you a US citizen or permanent resident?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Your status, if not a citizen:</i>	<b>Ethnicity</b> <i>Are you of Hispanic or Latino descent?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Race (Check all that apply)</b> <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian/Pacific Islander
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**Veteran Status:** Are you a Veteran or Veteran Dependent? Yes No

### Academic Information

- Are you currently enrolled at Carteret Community College? Yes No
- What is your primary Program of Study? \_\_\_\_\_ Program Code \_\_\_\_\_
- Which credential do you hope to complete? Associates Diploma Certificate
- Do you plan to transfer? Yes No Undecided If yes, which school: \_\_\_\_\_
- What is your cumulative GPA? \_\_\_\_\_
- Are you on academic warning, probation, or suspension? Yes No
- Are you on financial aid warning, probation, or suspension? Yes No
- Do you currently receive the Pell Grant? Yes No
- Have you completed an Associates or Bachelor's degree? Yes No

## TRiO Eligibility Information

### First Generation Verification

1. Did either parent/guardian with whom you resided earn a bachelor's degree before you turned 18?  Yes  No

**Please check the highest level of education completed by your parents/legal guardians.**

	Less than High School	High School Graduate/GED Completer	Some College (Did not complete)	Associate's Degree	Bachelor's Degree or Higher	Unknown
Parent/Guardian One						
Parent/Guardian Two						

### Income Verification

**Please attach to your application a copy of your most recent Federal Income Tax Return (1040, 1040A, 1040EZ) - First two pages only.**

- 1) What is the total number of persons (including you) in your household as reported on your income taxes? \_\_\_\_\_
- 2) What was your family's **Taxable Income** (not gross) from the last calendar year as reported on your income taxes?  
\$ \_\_\_\_\_

If you identify as an independent student (i.e., 24 years of age or older, married, have legal dependents, homeless youth, foster care youth, or serve in the military) bring your most current tax return; however, if you identify as a dependent (i.e., you are claimed by your parent or guardian, bring your parent/guardian's most current tax return.) Please make sure that your parent/guardian signs the application if you are applying as a dependent.

### Disability Status

1. Do you have any documented disabilities?  Yes  No  
(If yes, do you receive accommodations or services at CCC?  Yes  No)

### TRiO Services Requested (check all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Academic Advising/Counseling<br><input type="checkbox"/> Budgeting & Managing Money<br><input type="checkbox"/> Campus visits to 4 year colleges<br><input type="checkbox"/> Career Exploration/Counseling | <input type="checkbox"/> Financial Aid & FAFSA Assistance<br><input type="checkbox"/> Personal Counseling/Coaching<br><input type="checkbox"/> Selecting your Major<br><input type="checkbox"/> Improve Study Skills & Success | <input type="checkbox"/> Transfer Assistance<br><input type="checkbox"/> Test Taking & Anxiety<br><input type="checkbox"/> Tutoring<br><input type="checkbox"/> Understanding College |
|---|--|---|

### Certification & Signature

I attest that the information provided is true and accurate to the best of my knowledge. I give permission to SSS to review, obtain, or make copies of all necessary CCC and prior educational documents (i.e., financial aid records, high school and college transcripts, assessment results, etc.) in order to determine program eligibility and/or enhance the effectiveness of the program and services provided. I give permission for SSS to track my enrollment upon completion of my program through the National Student Clearinghouse.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature (if applicable):** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Staff Use Only

Intake Date: \_\_\_\_\_ Status:  Accepted  Waitlisted  Denied Cohort Year \_\_\_\_\_

Eligibility:  LIFG  LI  FG  D  D&LI  NE Academic Need for Support: Number code: \_\_\_\_\_

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_