



STUDENT SUPPORT SERVICES PARTICIPANT APPLICATION

STEP 1: Please answer	the following questions about yourself.			
a. What is your name?	Last Name			
	First Name			
	Middle Initial			
b. What is your mailing				
address?	Street Address Apt. #			
	City	State Zip		
c. What is your home phone	<u> </u>	Ciaic 2ip		
number?	(<u> </u>		
d. What is your cell phone number?	()			
f. What is your e-mail address?		@		
	or the following questions about vourself	<u>u</u>		
	er the following questions about yourself.			
a. What is your major?b. What is your student ID numb				
(if applicable)	K 0 0			
c. What is your birthdate?	M M I D D I Y Y	YY		
d. Are you Hispanic or Latino?	☐ YES	□ NO		
e. What is your race? (Please check all boxes that describe you.)	☐ American Indian ☐ Asian ☐ Black or Afric or Alaska Native ☐ American	can		
f. What is your gender?	☐ Female ☐ Male			
STEP 3: Please answ	er the following question about yourself.			
a. Are you a U.S. citizen?	☐ YES ☐ NO, but I am a Permanent Re	esident.		
	My Permanent Resident Alien Number is: citizen, and I am not a			
	A	permanent resident.		
STEP 4: Please answ	er the following questions about your parents and about yo	ourself.		
a. Has your mother received/earr	<u> </u>			
b . Has your father received/earne				
c. Which parent did you regularly	reside with and receive support from during			
your childhood (i.e., until you w	ALC 1X VESTS OIG 17	h Mother and Father		
(Please check only one box.) STEP 5: Please answ	ver the following questions about yourself.	,		
a. Are you married?	or the following questions about yoursell.	☐ YES ☐ NO		
b. Do you have children or other dependents (other than a spouse) who receive more than half of their support from you?				
c. At any time since reaching 13 years of age, were you an orphan, in foster care, or a ward of the court?				
d. Prior to reaching 18 years of age, were you an emancipated minor or did you have a court-appointed legal guardian?				
	duty (for other than training purposes) in the U.S. Armed F	· · ·		
f. Are you a U.S. Armed Forces veteran who was on active duty & was released under a condition other than dishonorable? 📮 YES 🔲 NO				

	<u> </u>	M.A., M.S.), professional (e.g., M.D.	, J.D.), or doctoral degree?	☐ YES ☐ NO
	an 18 years of age and have no	<u>. </u>		☐ YES ☐ NO
STEP 6 You must answer the fo	llowing questions about yoursel	$\underline{\mathbf{f}}$ if you answered YES to any ques	or are at risk of becoming homeless? stion in STEP 5. about themselves if you answered NO	YES NO O to all questions in STER
a. What is the total nun	ber of persons (including you)	in your family?		
b. What was your family's taxable (not total) income from the last calendar year? (Please check only one	year was:	otal) income from the last calendar and on the federal income tax return.	\$,	.00
box. Then, provide the requested income information.)		eral income tax return for the last total income from the last calendar	\$.00
	☐ My family had no taxable i	ncome during the last calendar yea	r.	
effectiveness of TRiC	program activities, and fulfill TR likeness, without charge, for pr	RiO program-reporting requirements	s, discern the student's educational p . Finally, I authorize this SSS project to publications, advertising, video, and to the publications of the	to use the student's other formats.
Parent's Signature			Da	ite
FOR OFFICE USE ONLY Recommended Appropriate Not Recommended Reason:	low-income leve members	al TRIO programs annual for a family unit was is: Recommended Approval Not Recommended.eason:		.00
Advisor (Print name)	Direct	tor (Print name)	_	
Advisor (Sign & Date)	//20	//20	_	
Date of Application En		<u> </u>	ials of Data Entry Staff	
Eligibility: 🗖 LI	-	ONLY DI ONLY LI		
Notes: A determinati statement that is co (RHYA) director/desi If the applicant is independence, a stat If the applicant is	on of independence based upleted and signed by a signee, or Environmental, so college student for who ment from a financial as dependent college student	Local Education Agency (LEA Social, and Governance (ESG om a financial aid administ id administrator must be si ent and no parent signature	on 5h or 5i must be supporte) liaison, Runaway and Homel) director/designee. rator has made a documented gned and attached.(cf., §108 appears on this document, p of LI status to be valid (§1	ess Youth Program determination of 7vv(d)) arent-income

D)).

Revised: 12/2022