

TRiO SSS is a federally funded program with in-kind support from Anoka-Ramsey Community College

PSEO AND INTERNATIONAL STUDENTS ARE NOT ELIGIBLE FOR TRiO SSS

PERSONAL DATA

Date of this Application: _____ Social Security Number: _____ - _____ - _____

Student ID Number _____

Name: _____
Last First Middle

Address: _____
Number/Street Apt. Number

City State Zip Code

Phone: Home (____) _____ Cell (____) _____ Work (____) _____

E-Mail Address: _____ ARCC Email Address (required): _____

Birth Date: Mo _____ Day _____ Yr _____ Male Female Single Married

Emergency Contact (someone who will always know how to reach you):

Name _____ Phone (____) _____

Address _____ Relationship to You _____
(City/ State/ZIP code)

Predominant Ethnic Background: (check one)

- _____ American Indian or Alaskan Native
- _____ Asian
- _____ Black or African-American
- _____ Hispanic or Latino
- _____ Caucasian
- _____ Native Hawaiian or Other Pacific Islander
- _____ More than One Race

Citizenship:

- _____ United States Citizen
- _____ Permanent Resident*
- _____ Refugee*
- _____ Other

* Documentation verifying citizenship **is required** with your application (copy of green card or letter stating refugee status).

For Office Use Only:

Application Received:

- ___ Accept ___ Wait List
- ___ Deny ___ Defer
- ___ Not Qualified

TRiO SSS Entry Date: _____

First School Enrollment Date _____

Cohort Year _____ No Publications _____

Academic Need:

- Low HS Grades
- Low admissions scores
- Predictive indicator
- Diagnostic tests
- Low college grades
- HS equivalency
- Failing grades
- Out of pipeline 5+yrs
- Other
- Limited English proficiency
- Lack of educational and/or career goals
- Lack of preparedness for college level work
- Need for academic support to raise grade(s)

Eligibility:

- FG - date verified _____
- LI - date verified _____
- Taxable Income \$ _____
- Number in household _____
- D- date documented _____

Program entry level:

- 1st year, never attended
- 1st year, attended before
- 2nd year, sophomore

Major _____

Transfer Institution _____

Advisor _____

When did/will you first enroll at Anoka-Ramsey? _____ Term _____ Year

Current/Anticipated number of credits: _____ Full-time _____ Part-time

_____ Day Student _____ Evening Student _____ Both Day/Evening

ELIGIBILITY INFORMATION

If you/your family filed for income tax last year, what was the taxable income (not adjusted gross)? A copy of your federal tax forms (first two pages) is required with your application. If you are 24 or under, a copy of your parent's 1040 tax form is required.

_____ Less than \$16,335	_____ Less than \$44,985	Number of people in your family _____
_____ Less than \$22,065	_____ Less than \$50,715	
_____ Less than \$27,795	_____ Less than \$56,445	
_____ Less than \$33,525	_____ More than \$56,445	
_____ Less than \$39,255		

Who are the family members in your household (excluding yourself)?

Family Members	Relationship to You	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

What is the highest level of education COMPLETED by the parent(s) you grew up with?

	Grade	High School	2-Year School	4-Year College	Beyond College
Mother	_____	_____	_____	_____	_____
Father	_____	_____	_____	_____	_____

Please identify any disabilities (medical, psychological, learning) you have and any services you have received:

NOTE: DOCUMENTATION OF YOUR DISABILITY IS REQUIRED WITH YOUR APPLICATION.

Accommodations and services for disabilities are provided by the Access Services Department. If accommodations/services are needed, please contact the Access Services Department at 753-433-1350.

HAVE YOU INCLUDED YOUR FEDERAL TAX INFORMATION?
FEDERAL TAX INFORMATION IS REQUIRED WITH YOUR APPLICATION.
(SEE NOTE ON PAGE TWO)

STUDENT PUBLICITY RELEASE

I agree that if I am accepted into the TRIO SSS program, the staff may include my name or picture in publications, including our website, which list the names of TRIO SSS students receiving academic awards, such as the Dean's List, scholarships, service awards, and other academic achievements and accomplishments.

Student Signature

Date

RELEASE OF INFORMATION

I certify that the information I have provided on this application is, to the best of my knowledge, complete and correct. Furthermore, I understand that by applying for the TRIO SSS program, I authorize TRIO SSS staff to obtain records or data pertinent to my participation from other sources, and to release information, as required by law or the terms of the Student Support Services grant, to the grant-funding agency of the United States government. The TRIO SSS staff has my permission to communicate verbally or otherwise with staff, faculty, and/or off-campus professionals on my behalf.

Student Signature

Date

PARTICIPANT CONTRACT

I understand that if I am to receive services from this program I must accept the following responsibilities as a program participant:

1. To show academic progress toward my educational goal at Anoka-Ramsey Community College;
2. To complete an associate's degree from Anoka-Ramsey or complete an associate's degree from Anoka-Ramsey and transfer to a four-year institution to complete a bachelor's degree.
3. To arrange and attend an appointment with my advisor at least three times per semester;
4. To give up my spot in TRIO SSS if I fail to actively participate in the program.

I understand that I will have access to many services provided by the TRIO SSS program staff at no additional cost beyond my regular tuition and fees as an Anoka-Ramsey student. I also understand that my records will be treated confidentially by program staff as required by law and/or the terms of the federal TRIO program.

Student Signature

Date

Advisor Signature

Date

Submit this application to:

TRIO SSS
Anoka-Ramsey Community College
(Coon Rapids Campus)
11200 Mississippi Boulevard NW
Coon Rapids, MN 55433-3470
Phone: 763.433.1170 Fax: 763.433.1521

For further information, visit our website at www.anokaramsey.edu and enter "SSS" in the search bar.