



**NC State University**  
**Student Support Services Program**  
**Student Support Services STEM Program**  
 204 Park Shops, Campus Box 7105, Raleigh, NC 27695  
 Phone (919) 513.7774 | Fax (919) 513.7542  
<http://www.ncsu.edu/TRIO>



## 2018–19 PROGRAM APPLICATION

NC State University TRIO Student Support Services (SSS) and Student Support Services STEM (SSS-STEM) Programs strive to encourage educational opportunities for undergraduate students by providing academic and personal support to enhance academic skills, increase retention and graduation rates, and as appropriate, facilitate entrance into graduate and professional programs. TRIO SSS and SSS-STEM provide opportunities for academic and personal development by assisting students with college requirements, motivating students toward the successful completion of their postsecondary education and promoting graduate school enrollment through individualized coaching, programming and tutoring, at no cost to the student.

\_\_\_\_\_  
**\*Social Security Number**                      **Student ID Number**                      **Date of Birth** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
**First**    **M.I.**                      **Last**

\_\_\_\_\_  
**Current (Campus) Address**                      **City**                      **State**                      **Zip Code**

\_\_\_\_\_  
**NC State Email**    **Best phone number to be reached**

I identify my gender as: \_\_\_\_\_

U.S. Citizen or Permanent Resident:  Yes  No

**To which racial or ethnic group(s) do you most identify? Check all that apply.**  
*For statistical purposes only.*

- |  |   |
|--|---|
| <input type="checkbox"/> Hispanic or Latino  | <input type="checkbox"/> American Indian/Alaskan Native |
| <input type="checkbox"/> Asian               | <input type="checkbox"/> Black/African American         |
| <input type="checkbox"/> White/Caucasian     | <input type="checkbox"/> Native Hawaiian or Islander    |
| <input type="checkbox"/> <b>Other:</b> _____ |   |

**Emergency Contact**

**Name (Parent, Guardian or Partner)** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

---

## EDUCATIONAL ASSESSMENT

---

**College or Department at NC State**  
(ex. CHASS, PCOM, UC, etc.)

---

**Major(s)**

---

**Academic Advisor**

---

**Minor(s)**

---

How did you hear about the TRIO SSS Programs?

---

**Current Classification (based on hours completed or transfer hours to NC State):**

Freshman (0-29 credit hours)

Junior (60-91 credit hours)

Sophomore (30-59 credit hours)

Senior (92 or more)

---

## FIRST-GENERATION

A first-generation college student is defined as a (1) A student neither of whose natural or adoptive parents received a baccalaureate degree; (2) A student who, prior to the age of 18, regularly resided with and received support from only one parent and whose supporting parent did not receive a baccalaureate degree; or (3) An individual who, prior to the age of 18, did not regularly reside with or receive support from a natural or an adoptive parent.

**Based on this definition, are you a first-generation college student?**     Yes     No

---

## FINANCIAL ASSESSMENT

Please answer the following questions by checking the appropriate response and completing the statements as it applies to your household. Documentation of Household Size and Taxable Income is required to determine financial eligibility for participation in TRIO Programs.

Did anyone in your household file federal income tax last year?

(20\_\_\_\_) Yes       No

If yes, what was the **taxable** income: \_\_\_\_\_

*Taxable income can be found on Line 6 on 1040EZ / Line 27 on 1040A / Line 43 on 1040.*

**\*Application cannot be processed without taxable income information; it may be zero.**

Total Number in Household: \_\_\_\_\_

**Read the following statement and sign:**

My signature certifies that the above information is correct. I understand that this information is confidential and will only be used for income verification for this program.

---

Student Signature

---

Date

---

Parent/Guardian Signature (if student is a dependent)

---

Date

---

## PROGRAM ASSESSMENT

Have you previously participated in any of the following programs?  Yes  No

*If yes, please check which one.*

Upward Bound/Upward Bound Math & Science/Veterans Upward Bound  Talent Search

GEAR Up  Student Support Services (**Transfer Students ONLY**)

At what school(s)? \_\_\_\_\_

Are you a Pack Promise Scholar?  Yes  No

Are you registered with the Disability Resource Office? \*  Yes  No

*\*If yes, please include a copy of your Letter of Accommodations along with your application.*

Do you have any documented physical, psychological, learning, chronic and/or temporary disability?  Yes  No

*If you would like to disclose your disability, please do so below. This voluntary information will be kept confidential and is only used for determining eligibility within the program. Once accepted into the program, this information is only used to design an academic success plan with your TRIO Academic Coach.*

### TRIO Peer Mentor Program

TRIO Scholars who are new to NC State will be required to participate in a peer mentor program (either with TRIO or another program on-campus).

If you are a part of a peer mentor program at NC State, please list it here: \_\_\_\_\_

---

## PRELIMINARY NEEDS ASSESSMENT

Below is a list of services available through Student Support Services. Please check any services you would find beneficial to your academic success.

- |   |   |
|---|---|
| <input type="checkbox"/> Academic Skills Coaching (Time Management, Study Skills, Test-Taking Strategies) | <input type="checkbox"/> Cultural & Academic Exposure                                       |
| <input type="checkbox"/> Academic Tutoring (Peer and/or group)  | <input type="checkbox"/> FAFSA & Financial Aid Help (Loans, Scholarships, FAFSA Assistance) |
| <input type="checkbox"/> Campus & Community Engagement  | <input type="checkbox"/> Financial Literacy Education (Budgeting and Money Management)      |
| <input type="checkbox"/> Career Coaching & Exploration  | <input type="checkbox"/> Graduate School Preparation  |

---

### PERSONAL STATEMENT

In the following area, please write a short statement of your personal goals and career aspirations, as well as the most likely complication that might delay your graduation.

## **NC State University TRIO Collegiate (SSS and SSS-STEM) Programs Release of Information**

I, \_\_\_\_\_, authorize NC State University TRIO Student Support Services (SSS) and Student Support Services STEM (SSS-STEM) Programs to gather information concerning my academic progress (mid-semester progress reports standardized test scores, grade point average, earned credits, transcripts) and financial aid information prior to my participation and throughout my involvement in SSS or SSS-STEM. I understand that this information is used to assist in the determination of my eligibility for the TRIO Collegiate Programs and it will be held strictly confidential. I am aware that my eligibility, participation and financial aid status will be reported to the U.S. Department of Education in accordance with the grant funding regulations.

I certify that the information provided on this application is true and complete to the best of my knowledge. I also agree to provide documentation upon request to verify the information reported. I am aware that the personal information that is provided to the TRIO Collegiate Programs will be protected under the Family Education Rights Privacy Act of 1974. No one will have access to the information unless they work with or for the NCSU TRIO Programs or they are specifically authorized by me to see the information.

Upon formal acceptance into the program, I grant permission for program representatives to have access to my official academic and financial records in order for SSS staff to assist me. Additionally, in the course of my involvement in the SSS or SSS-STEM program, TRIO staff may consult with various NC State University offices and programs to secure and share the necessary information pertinent to my participation in the program and overall collegiate success.

Finally, I give my permission to use photographs, quotes, and statements and/or print my first and last name in any and/or all publications for Student Support Services.

---

**Signature**

**Date**

---

**Parents Signature (for applicants under the age of 18)**