



Student Support Services TRIO Student Application

Date _____

SCC Campus Attending: Beatrice Lincoln Milford

Student ID#: _____

Name (full name): _____
First Middle Last

Previous Names Used: _____ Name Preferred: _____

Current address: _____
Street Apt# City State Zip

Permanent address: _____
Street Apt# City State Zip

Email address: _____ Home Phone: _____ Cell: _____ Work _____

SS#: _____ DOB: _____ Gender: M/F US Citizen: Y/N Eligible Non-Citizen: Y/N

Emergency contact name: _____ Relationship to you: _____ Phone: _____

Ethnicity: Are you of Hispanic or Latino origin? Yes No No Response

Race:

- American Indian or Alaskan Native Black or African Asian
- Native Hawaiian or Pacific Islander Hispanic or Latino Mutli-racial
- Caucasian No Response

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• Academic Information: (If you do not have this information, please ask a TRIO Advisor for assistance.)

Did you graduate HS? Y/N OR Receive a GED? Y/N Date Completed: _____ HS GPA: _____

Have you been out of school for more than 5 years? Y/N

Is English your first language? Y/N If not, what is your first language? _____

SCC COMPASS or ASSET scores: Writing: _____ Math: _____ Reading: _____

ACT Scores: Composite: _____ English: _____ Math: _____ Science: _____ Reading: _____

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Is this your 1st college experience? Y/N If no, what other college(s) have you attended? _____

Have you already earned any other degrees? Y/N If so, what? _____

Can you complete your program in 3 years: Y/N

Academic Major: _____ Program Advisor: _____

Type of degree you are working toward: Associate's (AAS) Diploma Certificate

SCC Student Status: Full Time (12 hours or more) 3/4 time (9-12 hours) 1/2 time (6-9 hours) Less than 1/2 time

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• Financial Information: Please attach a copy of you and/or your parents previous federal taxes and your SCC financial aid award letter.

- Currently receiving a PELL Grant Currently receiving student loans
- Scholarships _____ Subsidized Unsubsidized Parent PLUS
- Other _____

Student Status:

