

Student Application



NAME:						
First		Middle		Last		
PREFERRED NAME:		ID:	DO)B:		
LOCAL ADDRESS:						
	Street/Apt		City	у	State	Zip
PERMANENT ADDRESS:	Street/Apt		Cit	y	State	 Zip
PRIMARY PHONE:	, .	Cell _]				_
EMAIL ADDRESS:						
WHAT IS THE BEST WAY TO	O REACH YOU? _	Phone Te	ext Email Ot	ther:		
U.S. CITIZEN: Yes / No I	If no, are you an EL	IGIBLE NONCITIZE	N? Yes / No			
ETHNICITY: Hispanic or Lati	no origin? Yes /	No / No Response				
RACE (Check as many as ap	ply):					
American Indian or Alas	kan Native	Asian	Black	or African Ar	nerican	
Native Hawaiian or Othe	er Pacific Islander	White	No Res	sponse		
Is English your first language	? Yes / No If no	o, what is your first l	anguage?			
ACADEMIC INFORMATIO	N:					
Have you ever been in a TRiO		n, UpwardBound, or	EOC program? Yes	s / No		
Are you a high school gradua	te? Yes / No If	f no, did you receive	a GED? Yes / No			
Program of Study:			Program Advisor:			
Have you been enrolled in an	y school, high scho	ol or college, in the _l	past five (5) years?	Yes / No		
Is this your first college expen	rience? Yes / No	If no, list the coll	ege(s) you've attend	ed and wher	n:	
Have you earned a college de	gree? Yes / No	If yes, Type of degi	ree:			
WHAT ARE YOUR EDUCATI graduation rates of its partici		iO Student Support	Services is a federal	ly funded pro	ogram des	igned to increase
Graduate with a degree	or diploma from SC	CC				
Graduate with a degree	or diploma from SC	CC, AND TRANSFER	to a 4-year college o	or university		
ADDITIONAL INFORMAT	<u>'ION</u> :					
Are you currently or have you	u previously been i	n foster care or a sta	ate ward? Yes / No)		
Did you "age out" of the foste	r care system? Ye	es / No				
Are you currently or have you	u previously been h	nomeless? Yes / No)			
Are you experiencing a disab Resource Office at SCC? Yes		/ No Response If y	ves, do you want info	ormation abo	out the Acc	ommodations

DOES PARENT 1/GUARDIAN HAVE A BACHELOR'S DEGREE OR HIGHER? Yes / No

DOES PARENT 2/GUARDIAN HAVE A BACHELOR'S DEGREE OR HIGHER? Yes / No / I was raised by 1 parent

TRiO SSS Scholars are expected to adhere to the following participant requirements:

- Participate in regular meetings with your assigned success coach
- Regularly read your emails
- Regularly reply to texts and attempted phone calls
- Remain active in the program until you graduate
- Show progress towards your academic goals
- Utilize any and all resources available to improve your college and personal success.

DO YOU AGREE TO THESE TERMS? Yes / No

selection process to determine if you are a good fit for	or our program. Please use additional paper if needed.
Explain why you would benefit from being selected as a TRiO	SSS Scholar.
In a few lines, write about your educational and career goals a	nd how the TRiO SSS Program can help you to meet these goals.
What is a challenge that you face, or have faced in the past? Ho	ow might that impact your college success?
By signing below, I certify that all of the information I hav	e provided is true and accurate to the best of my knowledge.
	from my student record to determine my eligibility. <u>I agree</u>
to turn in additional paperwork requested by TRiO SSS St	<u>aff</u> .
Circu atoms	D. C.
Signature:	Date: