# TRiO Student Support Services - Application Process

Please use Blue or Black ink when filling out the application.

## Who is Eligible for TRiO?

CSU students who are (a) U.S. citizen or permanent resident (b) pursuing a degree, and (c) currently enrolled in 10 or more credits (at least 5 at the college level) may be eligible for TRiO services. You also need to meet at least **ONE** of the following criteria:

1. First generation college student (neither parent has received a four-year college degree); or
2. Meet federal low-income guidelines; or
3. Have a documented disability.

## Applying For The TRiO Student Support Services Program

1. Fill out the application **completely**.
2. Attach copies of supporting documents
3. Sign and date application
4. Return the completed application with supporting documentation

If you filed **independent** for financial aid purposes, include your (and your spouse's income, if applicable.)

If you filed **dependant** for financial aid purposes, please include a copy of your award letter.

-FOR OFFICE USE ONLY-

Appointment date and time: ______________________

## Notification of Eligibility

If we determine you are eligible and that you can benefit from our services, we will notify you at the intake appointment, or later by phone, via email, or by letter.

## Orientation for TRiO SSS

You will then be required to attend a **TRiO Orientation Session**. After your orientation is completed, you need to make an **Individual Academic Planning** appointment with your TRiO Project Counselor.

## Individual Academic Plan (IAP)

At your IAP appointment, your TRiO Counselor will assist you in developing short-term and mid-range goals, map out your degree plan, and identify strategies for you to become an **Active** participant.
STUDENT SUPPORT SERVICES ELIGIBILITY SURVEY

TO HELP US BETTER SERVE YOU, PLEASE COMPLETE THIS SURVEY. THE SURVEY WILL ASSIST US IN DETERMINING IF YOU ARE A FIRST-GENERATION STUDENT.

FAILURE TO ANSWER ALL OF THE QUESTIONS LISTED CAN DELAY THE PROCESSING OF YOUR APPLICATION.

Please answer the following questions by placing an X in one of the boxes below the questions.

1. When you enrolled at Chicago State University did you enter as a?
   - [ ] Chicago State University student
   - [ ] University College student
   - [ ] Board of Governors/Continual Studies student

2. How many credits hours have you earned?
   - [ ] 0-29 (Freshman)
   - [ ] 30-59 (Sophomore)
   - [ ] 60-89 (Junior)
   - [ ] 90 or more (Senior)
   - [ ] Other: ______________________________

3. How many people are in living in your household? (Please include yourself in the number)
   - [ ] One
   - [ ] Two
   - [ ] Three
   - [ ] Four
   - [ ] Five
   - [ ] Six
   - [ ] Seven
   - [ ] Eight or more (please enter number: ____________)

4. Are you or any member in the household receiving any/or all of the public benefits listed below?
   - [ ] TANF (Temporary Assistance for Needy Families)
   - [ ] SNAP (Supplemental Nutrition Assistance Program)
   - [ ] Medicaid
   - [ ] No
   - [ ] If you mark A, B, or C skip the next question

5. What is the annual household income?
   - [ ] 0-$16,755
   - [ ] 16,756-$22,695
   - [ ] 22,696-$28,635
   - [ ] 28,636-$34,575
   - [ ] 34,576-$40,515
   - [ ] 40,516-$46,455
   - [ ] 46,456-$52,395
   - [ ] 52,396-$58,335
   - [ ] $58,336 and above

6. Has either of your parents earned a degree?
   - [ ] NO
   - [ ] Yes (Name of college or university) ________________________________

7. If you answered yes to the above question what is the degree your parent(s) attained?
   - [ ] Associates Degree
   - [ ] Bachelors Degree
   - [ ] Masters Degree
   - [ ] Postgraduate Degree
The following information is required to determine your eligibility for program services. Please answer each question to the best of your ability. This information is confidential and used only as outlined in the agreement included on the second page of this application.

**Student Support Services Application**
Chicago State University
9501 S. King Drive/DH 2nd Fl. Suite B TEL: 773.995.3864 FAX: 773.995.2588

**Student Information**
(Please classify yourself according to the University’s policy on grade level classification)

<table>
<thead>
<tr>
<th>Date: ______________________</th>
<th>Classification: ______________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: _____________________</td>
<td>________________________________</td>
</tr>
<tr>
<td>Last</td>
<td>First</td>
</tr>
</tbody>
</table>

**Student ID Number:**

**Social Security Number:**

*SSS is a federally-funded program. Your social security number is confidential and, under the Family Educational Rights & Privacy Act, the college will protect it from unauthorized use and/or disclosure. In compliance with state/federal requirements, disclosure may be required for the purposes of state/federal financial aid, academic transcripts, assessment, or accountability research.*

<table>
<thead>
<tr>
<th>Address: ________________________________</th>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Home Phone: ____________________________</th>
<th>Cell or Message Phone: ____________________</th>
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</thead>
</table>

<table>
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<tr>
<th>CSU E-mail: ____________________________</th>
<th>Secondary email: __________________________</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Do you have a Facebook Account?</th>
<th>No</th>
<th>Yes. If yes Facebook identifier: ____________________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Do you have a Twitter Account?</th>
<th>No</th>
<th>Yes. If yes Tweeter identifier: ____________________________</th>
</tr>
</thead>
</table>

*Student Support Services participants will automatically be added to the TRiO SSS distribution list*

<table>
<thead>
<tr>
<th>Gender:</th>
<th>Male</th>
<th>Female</th>
<th>No Response</th>
<th>Date of Birth: ________________________</th>
</tr>
</thead>
</table>

<table>
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<tr>
<th>Ethnicity:</th>
<th>African American</th>
<th>Asian</th>
<th>Hispanic or Latino</th>
<th>White</th>
<th>American Indian</th>
<th>Native Hawaiian/Pacific Islander</th>
<th>More than one race</th>
<th>No response</th>
</tr>
</thead>
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<thead>
<tr>
<th>Is English your first language?</th>
<th>Yes</th>
<th>No</th>
<th>If you answer no what is your first Language? ____________________________</th>
</tr>
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<tr>
<th>Have you ever participated in a TRiO program?</th>
<th>Yes</th>
<th>No</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>If yes, please indicate which programs?</th>
<th>Educational Talent Search</th>
<th>Upward Bound</th>
<th>SSS</th>
<th>EOC</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Other: ________________________________</th>
<th>Where: (List School or Organization) ____________________________</th>
</tr>
</thead>
</table>

EDUCATIONAL BACKGROUND

Have you graduated from high school?  □ Yes  □ No
High School: __________________________ Grad. or GED Year: ____________

Have you attended any other colleges?  □ Yes College: ___________________ Total Credits earned: ______  □ No

Have you earned a degree?  □ Yes Type of degree: __________________________  □ No

Educational Goals

What is your program of study? ____________________________________________________________

What degree are you seeking at CSU? _____________________________________________________

Are you planning to go to graduate school?  □ Yes  □ No  □ undecided

Needs and Goals:
Please identify areas of Academic need:

☐ Math  ☐ English Proficiency  ☐ Time Management

☐ Foreign Language  ☐ Computer Skills  ☐ Study Skills

☐ Reading  ☐ Research Skills  ☐ Note Taking

☐ Writing  ☐ Organization  ☐ Testing/Test Prep

What Other Factors are influencing your academic success?
Financial:  □ Budget  □ FAFSA  □ Grants/Scholarships  □ Loans

Personal Issues:  □ Stress Management  □ Substance Abuse  □ Relationships  □ Anxiety or Depression

Grad School:  □ Applications  □ Search Process  □ Funding  □ General Ed. Requirement

Other:  □ Career Planning  □ Goals/Decision Making  __________________________

Advising need:

☐ Course Selection  ☐ Major/Minor  □ BA/BS Decision  □ General Ed. Requirement

☐ Internships  ☐ Mentoring  □ Career Goals  __________________________
I certify that the information provided on this application is true and complete to the best of my knowledge. I also agree to provide additional documentation upon request to verify the information reported.

I authorize TRiO Student Support Services (SSS) to gather information concerning my academic progress and financial aid status both prior to my participation in SSS and after becoming a program participant. I understand that the information used is solely for assisting in the determination of program eligibility. Therefore, the information that you provide is imperative to enhancing the effectiveness of the program and services provided to me. I also give my permission for TRiO personnel to share information with appropriate educators and college representatives as necessary to support my educational program and academic success. I am aware that my eligibility and financial aid status at some point will require SSS to report to the U. S. Department of Education in accordance with grant funding regulations.

TRiO Student Support Services works to provide privacy for students participating in the program. In addition to the waivers, apply:

- When a student knows of any case of child or elderly abuse
- When a student discloses that s/he is a threat to self or others
- When our records are legally subpoenaed

If any apply, I understand TRiO SSS is legally required to report information to the appropriate authorities. Therefore, by signing the form I agree to the terms above outlined in this disclaimer and understand the ramifications of what I am signing.
Eligibility Verified:

☐ Disability ☐ First Generation ☐ Low-Income

☐ First Generation and Low-Income ☐ H S Equivalency ☐ Other __________________________

Academic Need:

☐ Away from Academic regime for 5+ years ☐ Low College GPA ☐ Failing Grades

Diagnostic Test:

Course Placement levels: English ____________ Reading ____________ Math ____________

Number of people in household: ____________ Number of people employed: ____________

Amount of Monthly Income: ____________

Amount of Annual Taxable Income: ____________ Type of non-taxable income: ____________

Monthly or yearly amount of non-taxable income: ________________________________

Accepted: ☐ No ☐ Yes

Denied: ☐ No ☐ Yes ________________________________

Orientation / Enrollment Date __________________________

Project Counselor Signature: ____________________________ Date: ____________________________

Director’s Signature: ____________________________ Date: ____________________________
If you are interested in attending CSU, please complete our graduate or undergraduate form, and we will send you admissions information.

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