**Application for Hocking College**

**TRiO Student Support Services**

3301 Hocking Parkway, DVD 120A

Nelsonville, Ohio 45764

The Student Support Services program provides **academic and support services** to Hocking College eligible participants to assist them in achieving a certificate or degree and transferring to a four-year college.

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| **Part I: Background and Contact Information** *(Please complete all portions in ink and bring/send to the Trio Office)*Student’s Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MI: \_\_\_\_ Social Security No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_Hocking Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_**Background:** Please choose the race(s) with which you identify: [ ] American Indian/Alaskan Native [ ] Asian[ ] Black/African American [ ] White [ ] Native Hawaiian/Pacific Islander [ ] more than one race Are you Hispanic/Latino? [ ] Yes [ ] No**Gender**: [ ] Male [ ] Female [ ] Non-binary or another gender  |
| **Eligibility Information Based on Federal Regulations (**Citizen, First-Generation, Income**)**Are you a **U.S. Citizen**? [ ] Yes [ ] No If no, are you a legal resident of the United States? [ ] Yes [ ] No**Dependent Student**: (filed your FAFSA as a dependent using parent income) [ ] Yes [ ] No Total number of Individuals in the Family Unit: \_\_\_\_\_\_ Taxable Income: $\_\_\_\_\_\_\_\_\_\_\_\_ All information provided is accurate, and I grant permission for my dependent to participate in the SSS program. **Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** *(Taxable income can be found on IRS 1040 line 15)*

**Independent Student:** (filed as Independent on your taxes and FAFSA) [ ] Yes [ ] NoTotal number of Individuals in the Family Unit: \_\_\_\_\_\_ Taxable Income: $\_\_\_\_\_\_\_\_\_\_\_\_ **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Highest Level of Education obtained by your parent(s):**Mother: Bachelor’s Degree \_\_\_ Associate’s Degree \_\_\_ High School Diploma/GED \_\_\_ Unknown \_\_\_Father: Bachelor’s Degree \_\_\_ Associate’s Degree \_\_\_ High School Diploma/GED \_\_\_ Unknown \_\_\_ |
| **College Grade Level & Goals: Hocking Start**: Fall [ ] Spring [ ] Summer [ ] Year \_\_\_\_\_\_\_\_\_1st year never attended college [ ] 1st year attended before [ ] 2nd + year of college [ ] Do you plan to earn: a Certificate [ ] an Associate degree [ ] Transfer to a 4 year college [ ] |
| *I certify that all information I have provided is true and accurate to the best of my knowledge. I give the Trio SSS program authorization to obtain any information necessary to process this application and to monitor my progress throughout my time at Hocking College. This includes permission to talk to my parents.* Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **OFFICE USE ONLY:** *First-generation college student means*: a) A student neither of whose natural or adoptive parents received a baccalaureate degree; b) 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 c) An individual who, prior to the age of 18, did not regularly reside with or received support from a natural or adoptive parent. **Eligibility:** [ ] FG/LI [ ] FG Only [ ] LI Only / Disabled\_\_\_ No Disabled and Low-income\_\_\_**Status:** [ ] New [ ] New Summer only [ ] Reentry participant **Enrollment Status:** [ ] Full time (12+) [ ] 3/4 time [ ] 1/2 time [ ] < 1/2 time |
| **Academic Need:** Determined by information obtained in the Intake Interview and available documentation. 1. Low HS grades 2) Low Admission test scores 5) Predictive indicator\*

6) Academic proficiency tests 7) Low college grades 8) HS Equivalency Exam (GED) 9) Failing grades 10) Out of the academic pipeline (5+yrs.) 11) Other 12) Limited English proficiency 13) Lack of education or career goals 14) Lack of academic preparedness for college-level work 15) Need for academic support to raise grade(s) in required course(s)/major\*Predictive Indicator is a composite variable for estimating the potential success of a student in college using a variety of factors that may include indicators such as HS GPA, SAT/ACT test scores, initial course placement, etc. **Placement:**  **English course level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Math course level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Student Referred by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intake Completed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_Is student accepted into the Trio SSS program: [ ] Yes [ ] No [ ] PendingReason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Director’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Exit Information:** Reason for WD or Non-Returning Student1. Academic dismissal 2) Non-Academic dismissal 3) Financial reasons 4) Health reasons

5) Academic reasons 6) Personal reasons 7) Military or Decease8) Still enrolled, completed certificate, graduated or transferred 0) No response/unknown |
| Notes:  |

The Hocking College Student Support Services program is 100% funded by the U.S. Department of Education.