

PART 1: PERSONAL DATA

Student ID# _____ SS# _____

Applicant Name: (Last, First Name) _____ (MI) _____

Address: _____
(Street/P.O. Box) (City) (State) (Zip Code)

Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____

Email Address: _____ Can We Send You Text Messages: Yes No

Gender: Male Female Birth date: ____/____/____ -
MM DD YY

PART 2: ETHNIC/ITY/ RACE/ CITIZENSHIP GROUP

Are you Hispanic/Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you an eligible non-citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Select a RACE: <input type="checkbox"/> Caucasian/White <input type="checkbox"/> African-American/Black <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Asian
Are you a U.S Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Alien Registration Number: _____	

PART 3: MARITAL STATUS

Single Married Divorced Separated Widowed

PART 4: EDUCATIONAL INFORMATION

- Did you receive (check one): High School Diploma or GED
- Name of school _____ Year _____
- Have you attended a college other than OJC? Yes No If so, where? _____
- Date you started at OJC _____ Check if you have a Degree?
- Do you plan to attend college? Full-time Three-quarter time Half-time Less than half-time
- Target completion date at OJC? _____ Do your goals include transfer to a 4-year college? Yes No
- If you plan to transfer to a 4-year college, when? _____ Name of college: _____

Which OJC degree or certificate are you planning to pursue?
(Check the one that applies to you)

Associate of Arts (AA — *transfer degree*)

What is your major? _____

Associate of Science Degree (AS — *transfer degree*)

What is your major? _____

Associate of General Studies (AGS — *non-transfer degree*)

What is your major? _____

Associate of Applied Science (AAS — *non-transfer degree*)

What is your major? _____

Certificate _____

PART 6: FIRST GENERATION VERIFICATION

Did your mother earn a 4-year college degree?

Yes No

Did your father earn a 4-year college degree?

Yes No

Which parent did you regularly reside with and receive support from before the age of 18?

Mother Father Both Neither

PART 7: DISABILITIES VERIFICATION

Do you have any documented physical and/or learning disabilities? Yes No

If yes, is the disability information on file with the Otero Junior College Disability Office. Yes No

PART 8: INCOME VERIFICATION

Verification requirements for TRIO SSS vary depending on whether students are **Independent** or **dependent**. A list of federal criteria for independent student status is available at www.fafsa.ed.gov.

Part A: Independent Students (typically age 24 or older, married, or emancipated; parental income is **not reported** on the FAFSA): complete **Part A**.

Independent Student:

Total Number of Exemptions or total number of people claimed in household: _____

*Taxable or total Income: \$ _____

Student Signature _____

Date _____

*Form 1040 line 43, or Form 1040 A line 27, or Form 1040 EZ line 6. If taxes were not filed, please report total income from all sources.

Part B: Parent/Guardian (Dependent Student Only)

Dependent student (younger than 24., unmarried or not emancipated; parental income **is reported** on the FAFSA): parent/guardians must complete and sign **Part B**.

Dependent Student:

Total Number Exemptions or number of people claimed in household: _____

*Taxable or total income: \$ _____

Parent/Guardian Name (please print) _____

Parent/Guardian Signature _____

Date _____

*Form 1040 line 43, or Form 1040 A line 27, or Form 1040 EZ line 6. If taxes were not filed, please report total income from all sources.

PART 9: WORKSHOPS AND SERVICES (check all that you could use help with)

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Study Habits Tips | <input type="checkbox"/> Scholarship Tips | <input type="checkbox"/> Vocabulary/Math Skills | <input type="checkbox"/> Note Taking Tips |
| <input type="checkbox"/> Test Taking Skills | <input type="checkbox"/> Resume Writing Tips | <input type="checkbox"/> Tips for Relieving Stress | <input type="checkbox"/> Help Navigating the Computer |
| <input type="checkbox"/> Help Managing Money | <input type="checkbox"/> Time Management Tips | <input type="checkbox"/> Help Setting Goals | <input type="checkbox"/> Enhance Memory |

Which of the following services are you interested in receiving?

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Academic Advising | <input type="checkbox"/> Transfer Advisement | <input type="checkbox"/> Financial Aid Advisement | <input type="checkbox"/> Tutoring |
| <input type="checkbox"/> Cultural Events | <input type="checkbox"/> Campus Tours | <input type="checkbox"/> Personal Counseling | <input type="checkbox"/> Career Counseling |

PART 10: RELEASE OF INFORMATION

I authorize the **TRiO Student Support Services** Program staff to:

- gather information concerning all my academic progress (standardized test scores, grade point average, earned credit, transcripts, tutoring, etc.) and financial aid reports including Federal tax, FAFSA and verification of income prior to my participation in the program
- obtain information from the ADA office if I fall under the disability status
- gather information for follow-up whenever appropriate, including, but not limited to, transfer and progress to 4-year institutions
- report my eligibility, GPA, and financial aid status to the U.S. Department of Education in accordance with the grant funding regulations
- use my name, photo, or information about me in all college media sources and on the TRiO Facebook page

The information provided on this form is, to the best of my knowledge, accurate and true.

Student _____ Date _____

TRiO Staff _____ Date _____

PLEASE PROVIDE THE FOLLOWING INFORMATION WHEN YOU BRING IN YOUR APPLICATION

- Signed 20xx Federal Income Taxes/or Proof of Income/or Fixed Income Statement (if you did not fill out Part 8)
- Disability Verification letter from OJC Disability Office, if applicable
- Documentation of Citizenship, if applicable