**TRiO Student Support Services**

***The few, the proud, the exceptional!***

BELLEVUE COLLEGE

# Program Application

The following information is requested to determine your eligibility for program services. Please answer each question. This information will be kept confidential and used only as outlined in the participant agreement.

Date: _____

## Personal Information

**SS# :** _____ **BC Student ID# :** _____

**Name:** _____
*Last* *First* *MI*

**Address:** _____
*Street* *City* *State* *Zip Code*

**Home phone:** _____ **Work phone:**_____

**Cell/pager:** _____ **Email:** _____
*(TRiO participants will be automatically added to a TRIO distribution list)*

**Birth date:** _____ **Gender:** ☐ **Male** ☐ **Female**

**Race (Please check all that apply)**

- ☐ **American Indian or Alaskan Native**
- ☐ **Asian**
- ☐ **Black or African American**
- ☐ **White or Caucasian**
- ☐ **Native Hawaiian, other Pacific Islander**

**Ethnicity**
**Hispanic or Latino** ☐ **yes** ☐**no**

Are you a U.S. citizen: ☐ Yes ☐ No Or a permanent resident? ☐ Yes ☐ No

Is English your first language? Yes No If no, what is your first language? _____

## Program Eligibility

Your Family's taxable income for last year _____ Family size reported: _____

Are you receiving federal financial aid? ☐ Yes ☐ No Are you: ☐ dependent or ☐ independent

Are you a first-generation college student (neither parent nor guardian(s) has completed a four-year college degree)?
☐ Yes ☐ No

Do you have a documented disability?
☐ Yes ☐ No If yes, please describe: _____

If you answered yes to either question above, are you working with the Disability Resource Center? ☐ Yes ☐ No

Do you have a bachelor's degree? ☐ Yes ☐ No

(Students who have completed a bachelor's degree are not eligible for the TRiO program.)

**TRiO Student Support Services is 100% federally funded by the U.S. Department of Education in the amount of $247,584**
**3/26/2013**

## Educational History

What is the first quarter you attended at Bellevue College (month/year)? _____

What is your current grade level?
- ☐ First year – completed less than 45 college level credits
- ☐ Sophomore – completed at least 45 college level credits

Have you attended any other colleges? If yes, which one(s): _____

How many credits are you taking THIS quarter? _____ How many quarters have you COMPLETED at BC? _____

Current College Enrollment Status: ☐ Full-time ☐ Part-time

Are you a high school graduate? ☐ Yes ☐ No HS Graduation YEAR? _____

If you did not graduate from high school, did you finish a GED or HS completion program? ☐ Yes ☐ No

If Yes, YEAR completed? _____

## Educational Goals

What is your major? _____

What are your educational goals? _____

What degree are you seeking here at Bellevue College?

☐ Associate (2 year degree or program) ☐ Certificate (less than 2 years)

Do you plan to transfer to a FOUR-YEAR College or University? ☐ Yes ☐ No

Expected Transfer or Grad. DATE (quarter/year): _____ Intended Transfer Institution: _____

## Support Needs

How can the TRIO Student Support Services Program best support your educational goals?
Please check all that apply:

| | | |
|---|---|---|
| ☐ Academic Advising | ☐ Advocacy | ☐ Career Development/Advising |
| ☐ Financial Literacy | ☐ ESL Services | ☐ Financial Aid Advising |
| ☐ Tutoring | ☐ Mentoring | ☐ Personal Development/Support |
| ☐ Study Skills | ☐ Transfer Advising | ☐ Other: _____ |

**How did you find out about the TRIO Student Support Services Program?** _____

## Affidavit of Truth Statement

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

Student's signature: _____ Date: _____

**For Office Use Only**

☐ LI & FG ☐ LI ☐ FG ☐ DSS & LI ☐ DSS

Director/Assistant Director signature:_____ Date:_____

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