

PLEASE SELECT YOUR INCOME AND HOUSEHOLD SIZE FROM THE GUIDELINE BELOW:

Please check your family size

___ 1
___ 2
___ 3
___ 4
___ 5
___ 6
___ 7
___ 8

Check household Income Level

___ \$17,655 or below per year
___ \$23,895 per year
___ \$30,135 per year
___ \$36,375 per year
___ \$42,615 per year
___ \$48,855 per year
___ \$55,095 per year
___ \$61,335 per year

**Federal TRiO Programs 2015 Annual Low Income Levels, effective 1/28/2015 until further notice*

Do you have a documented disability? Yes ___ No ___ If yes, Please specify _____

Are you currently serving on active duty in the U.S. Armed Forces for purposes other than training? Yes ___ No ___

Are you a Veteran of the U.S. Armed Forces? Yes ___ No ___

ACADEMIC ADVISING QUESTIONNAIRE

Did you receive a High School Diploma? Yes ___ No ___ If yes, what year? _____

If you did not receive a high school diploma, have you earned your GED? Yes ___ No ___

Have you taken the College Placement Test? Yes ___ No ___

What services are you interested in receiving at FPCC? *(Check all that apply)*

___ Peer Mentoring ___ Academic Advising ___ Cultural Events/Activities
___ Career Advising ___ **Student Education Plan** ___ Financial Aid/Scholarship
___ Tutoring ___ Personal Counseling ___ **Financial literacy Seminars**
___ Needs Assessment Planning Other (Specify) _____

As an SSS participant you will be required to attend a minimum of three of the above listed services. Mandatory requirements are Financial Literacy and Student Education Plan.

**Please answer the following questions in a few sentences.*

Why did you choose to go to college, and why did you select FPCC in particular?

What are your career aspirations? What do you see yourself doing five years from now?

Is there anything else you would like to share with us that may help us assist you in meeting your educational goals?

ACKNOWLEDGEMENTS

Please read each statement below and initial or check that you understand and agree.

_____ I hereby give my permission for the FPCC TRiO– Student Support Services staff to access my academic and financial aid records for the purpose of verifying my eligibility and supporting me academically as a TRiO-SSS participant and an FPCC student. I understand the TRiO-SSS staff agrees to adhere to all guidelines outlined under the Federal Education Rights and Privacy Act.

_____ I hereby give my permission for the FPCC TRiO— Student Support Services staff to access my midterm and semester grades electronically for the purpose of supporting me and my academic performance at FPCC. I understand that I will have access to my academic record at any time.

_____ YES, I WANT TO BE A MEMBER OF THE FPCC TRiO— STUDENT SUPPORT SERVICES PROGRAM

I understand that all of the information provided on this form is true and complete.

STUDENT SIGNATURE _____ DATE _____

*Your application must be filled out completely and signed and dated before it will be processed.

FOR STAFF USE ONLY

Student is *enrolled* at institution: Yes _____ No _____

Classification: _____ Freshman _____ Sophomore

_____ # of credits _____ # of credits

Student is *eligible* for services on the basis of:

_____ (1)LI/FG _____ (2)LI Only _____ (3)FG Only (4)D Only _____ (5)LI/D

_____ LI Verification Document on File

_____ FG reported on SSS and college applications or FAFSA.

_____ DRS Release of Information Request

Citizenship: _____ US Citizen _____ Permanent Resident _____ Not citizen or permanent resident

(Permanent Resident # reported on college application _____)

Participant Type:

____ (1)ESL ____ (2)Veteran ____ (3)Disabled ____ (4)Foster Child ____ (5)Homeless ____ (6)N/A

(Utilize application and Interview Form to identify participant type)

Basis of Academic Need:

APR Code: _____

Term *Entered Program*: _____ Cohort Year: _____ Grant Year: _____

Student is *ineligible* for services on the basis of: Income _____ 1st Gen _____ Academic Need _____

Other _____

The signing of this form is to certify that all documents have been reviewed and eligibility has been determined

STAFF SIGNATURE _____ DATE _____

Database Entry Date _____ Entered By _____

Printed name and Initial