



# Kishwaukee College Student Support Services



## Program Application

### PERSONAL INFORMATION

LEGAL NAME \_\_\_\_\_  
LAST FIRST M.I.

STUDENT ID# OR DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP CODE

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

Would you like TRiO Student Support Services to contact you via text message (standard charges may apply)?  Yes  No

KC EMAIL \_\_\_\_\_@ST.KISHWAUKEECOLLEGE.EDU  
(Your KC email account is the only email TRiO will use for correspondence.)

### DEMOGRAPHIC INFORMATION

Gender:  Male  Female U.S. citizen or permanent resident:  Yes  No

To which racial or ethnic group(s) do you most identify? Check all that apply.

- Hispanic/Latino
- American Indian/Alaskan Native
- Native Hawaiian or Pacific Islander
- Asian
- Black/African American
- Other \_\_\_\_\_
- White/Caucasian

\*\*\*All participants will be selected without regard to race, color, creed, national origin, age, gender, religion or sexual orientation\*\*\*

### EDUCATIONAL INFORMATION

Are you a high school graduate?  Yes  No If no, did you receive a high school equivalency certificate?  Yes  No

Do you plan to earn a degree or certificate from Kishwaukee College?  Yes  No

If so, which:  A.A.  A.S.  A.F.A.  A.E.S.  A.A.S.

If you are seeking a career degree or certificate program, please indicate your program of study: \_\_\_\_\_

If not, what is your educational goal? \_\_\_\_\_

Do you plan to earn an associate degree and transfer to a four-year institution?  Yes  No

Do you currently attend Kishwaukee College?  Yes  No If yes, what semester and year did you start? \_\_\_\_\_

If not, when do you plan to attend?  Fall 20\_\_\_\_  Spring 20\_\_\_\_  Summer 20\_\_\_\_

Will you be a:  Full-time student (12 or more credit hours)  Part-time student (less than 12 hours)

Do you already have an advance degree?  Yes  No If so, which one?  Associate  Bachelor's  Master's

Have you participated in any of the following programs?  Upward Bound/Upward Bound Math & Science  Talent Search  
 Student Support Services

### ELIGIBILITY INFORMATION

Please check the box that describes you (if applicable):

The term "first generation college student" means:

- A student neither of those whose natural or adoptive parents received a bachelor's or 4-year college degree, or
- 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 bachelor's or 4-year college degree, or
- An individual who, prior to the age of 18, did not regularly reside with or receive support from a natural or an adoptive parent.

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Do you self-identify as having a documented disability that will impact the learning environment?  Yes  No

If yes, are you currently working with Kishwaukee College's Assistive Resources Center?  Yes  No

One purpose of the federal TRiO programs is to increase opportunity in education for students from low-income backgrounds; consequently, federal legislation requires that TRiO programs verify the financial eligibility of applicants before they can be admitted.

The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount.

For **Federal TRiO Programs Current-Year Low Income Levels** visit [www2.ed.gov/about/offices/list/ope/trio/incomelevels.html](http://www2.ed.gov/about/offices/list/ope/trio/incomelevels.html)

**Proof of income documentation requirements (Please check the one that applies.)**

*This information will be kept strictly confidential.*

- A signed statement from your parent or legal guardian. (Dependant students) \*See statement below to sign below.
- A signed statement from you. (Independent students) \*See statement below to sign below.
- Verification of family income from another governmental source.
- A sign financial aid application. (Such as FAFSA)
- A signed U.S. or Puerto Rico income tax return.

**\*Signed Statement:**

Number in your (or your parents) household: \_\_\_\_\_

Your (or your parents) annual family taxable income for last year: \_\_\_\_\_  
(Line 6 on Form 1040EZ, Line 27 on Form 1040A, Line 43 on Form 1040)

\_\_\_\_\_  
Parent/legal guardian or independent student signature

\_\_\_\_\_  
Date

**NEEDS ASSESSMENT**

**Check the services you need:**

- Academic Planning/Monitoring
- Academic Tutoring
- Scholarship Assistance
- Financial Literacy
- Mentorship
- Visits to 4-year Universities
- Career Planning and Advising
- Cultural Events
- Financial Aid and FAFSA Application Assistance
- Personal Advising
- Transfer Advisement
- Assistance with Course Selection

How did you hear about SSS or who referred you? \_\_\_\_\_

**CONSENT STATEMENT**

*By signature, I grant my permission to Kishwaukee College officials to share information regarding my academic record (i.e. admissions information, grades, financial aid and counseling records) with the Federal TRiO Program.*

*I certify all information on this form is true and accurate.*

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

**Please submit this application to:**

TRiO Student Support Services  
Kishwaukee College  
21193 Malta Road  
Malta, IL 60150  
Phone: 815-825-9304

**FOR OFFICE USE ONLY**

**Basis of Eligibility**

- 1. LI and FG
- 2. LI Only
- 3. FG Only
- 4. DD Only
- 5. DD & LI

Admitted  Yes  No

Assigned Advisor \_\_\_\_\_

Director Signature \_\_\_\_\_

Date \_\_\_\_\_