

Student Support Services, a TRIO Program, is funded by the U.S. Department of Education.

Instructions:

1. ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED, including required signatures.
2. Submit a copy of all unofficial college transcripts, financial award letter, completed FAFSA or income tax return, and photocopy of permanent resident card if applicable. If you have never attended college before, please submit a copy of your high school transcript.
3. Return to TRIO Student Support Services office (Wenatchee: Wells Hall 1074) or email to trio@wvc.edu
4. TRIO SSS will contact student within 5-7 business days.
5. Eligible students will be invited for an intake interview/orientation (60 minute appointment).

Personal Information

_____ Male _____ Female

Last Name _____ First Name _____ MI _____

SSN# _____ SID# (WVC Student ID#) _____ Date of Birth _____

Mailing Address _____ City _____ State _____ Zip _____

(_____) _____ @ student.wvc.edu

Phone **Texting ok?** ☐ Yes ☐ No WVC Student Email _____ Alternative Email _____

Are you a U.S. citizen? ☐ Yes ☐ No If no, are you a permanent resident? ☐ Yes ☐ No

Permanent Residents Only (USCIS#): _____ Expiration Date: _____

Is English your first language? ☐ Yes ☐ No Other languages you speak fluently? _____

Have you ever been in foster care or were a ward of the court? ☐ Yes ☐ No

Are you a U.S. Veteran (Have you served in the U.S. Military)? ☐ Yes ☐ No

Have you been involved with TRIO at any other institution? ☐ Yes ☐ No

Do you identify your *race* as: Native American/Alaskan Native ☐ Yes ☐ No

(Check all that apply if multiracial) Asian American ☐ Yes ☐ No

Black or African American ☐ Yes ☐ No

Caucasian or European American ☐ Yes ☐ No

Native Hawaiian or other Pacific Islander ☐ Yes ☐ No

Do you identify your *ethnicity* as: Hispanic or Latinx/a/o ☐ Yes ☐ No

Program Eligibility

Did either of your parents/guardians graduate from a 4-year college or university? ☐ Yes ☐ No

Do you have a documented disability? ☐ Yes ☐ No

If yes, have you documented it with the WVC Student Access Coordinator? ☐ Yes ☐ No

Financial Information

Are you currently receiving Financial Aid through WVC? ☐ Yes ☐ No

Did you or your family file a tax return for the previous calendar year? ☐ Yes ☐ No

Review chart for federal low-income guidelines. For families with more than eight members, add \$6,720 for each additional family member.

Number of people in your household, including yourself: _____

Your family's taxable income for last year: _____

For income tax purposes, are you? ☐ Dependent ☐ Independent

What is your marital status? ☐ Single ☐ Married ☐ Other: _____

Household Size	Taxable Income
1	\$19,140
2	\$25,860
3	\$32,580
4	\$39,300
5	\$46,020
6	\$52,740
7	\$59,460
8	\$66,180

Education

Do you have an undergraduate degree? ___ Yes ___ No

Did you receive your high school diploma or GED? ___ Yes ___ No Year received: _____

What are your educational goals? ___ Certificate ___ Associate's Degree ___ Transfer to 4-Year ___ Undecided

Expected graduation date (quarter/year): _____ Area of Study: _____

What is your current grade level? ☐ New Student (no college credits completed)
☐ Freshman (completed less than 45 college-level credits)
☐ Sophomore (completed at least 45 college-level credits)

Current enrollment status: ☐ Part-time Student (less than 12 credits per quarter)
☐ Full-time Student (12 credits or more per quarter)

Have you attended other colleges? ___ Yes ___ No If yes, which one(s)? _____
**Please remember to attach unofficial transcripts for all colleges previously attended.*

Student Needs Assessment - Check all that apply

Academic Advising, Course Selection, & Financial Literacy	Academic Support & Instruction	Individualized Guidance & Workshops
<input type="checkbox"/> Major & career information	<input type="checkbox"/> Overcoming text anxiety/stress	<input type="checkbox"/> Personal counseling referrals
<input type="checkbox"/> Job search skills	<input type="checkbox"/> Note-taking tips	<input type="checkbox"/> Improving confidence/assertiveness
<input type="checkbox"/> Academic advising/degree planning	<input type="checkbox"/> Presentations & public speaking	<input type="checkbox"/> Procrastination & goal-setting
<input type="checkbox"/> Transfer school information & advising	<input type="checkbox"/> Time management; prioritizing tasks	<input type="checkbox"/> Developing leadership skills
<input type="checkbox"/> Financial aid application assistance	<input type="checkbox"/> College-level reading and writing	<input type="checkbox"/> Improving communication & relationships
<input type="checkbox"/> Scholarship search & application help	<input type="checkbox"/> Test-taking tips; self-testing	<input type="checkbox"/> Managing family or work responsibilities
<input type="checkbox"/> Other concern: _____	<input type="checkbox"/> Other concern: _____	<input type="checkbox"/> Other concern: _____

Short Answer Response – Use the space below to answer. Attach additional pages if necessary.

Q. How will TRIO SSS help you accomplish your academic goals? From the list above, what is your greatest need?

Affidavit of Truth Statement

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

Applicant's Name (Please Print) _____

Applicant's Signature _____

Date _____

Internal Use

Academic Need

- ☐ Diagnostic tests ☐ High School equivalency ☐ Lack of academic preparedness ☐ Predictive indicator ☐ Failing grades
☐ Low High School Grades ☐ Limited English proficiency ☐ Low College Grades ☐ Lack of education and/or career goals
☐ Low Admission test scores ☐ Out of academic pipeline for 5 or more years ☐ Other _____

Eligibility ☐ First Generation ☐ Low Income ☐ Disability

Cohort _____

Institution Entry Date ____/____/____

Program Entry Level ☐ 1st Year, Never Attended ☐ 1st Year, Attended Before ☐ 2nd Year Sophomore (CLVL Credits _____)

Program Entry Enroll ☐ Less than ½ time ☐ ½ Time ☐ ¾ Time ☐ Full Time

Program Entry Date ____/____/____

Compass Scores Write _____ Read _____ Math _____

LASSI Scores

Anxiety	Attention	Motivation	Concentration	Self-Test	Study Aids	Time Management	Information Processing	Selecting Main Idea	Test Strategies
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Will: ☐ Cleared ☐ Recommended ☐ Required

Self-regulation: ☐ Cleared ☐ Recommended ☐ Required

Skill: ☐ Cleared ☐ Recommended ☐ Required

Date of first service ____/____/____

Financial Aid Received _____