



TRIO Student Support Services Application PERSONAL INFORMATION

Last Name: _____ First Name: _____ MI: _____

Chosen Name: _____

Date of Birth: _____ Colleague ID Number (7 digit #): _____

Home Address: _____ City: _____ State: _____ ZIP: _____

Cell Phone #: _____ Preferred Email: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Residency: US Citizen Permanent Resident Resident ID#: _____ Resident Alien

Gender: Female Male Other

Chosen Pronouns: She/Her/Hers He/Him/His They/Them/Theirs Ze/Zie/Hir

Primary Language Spoken at Home: _____

Race/Ethnicity (please check all that apply): Hispanic/Latino American Indian/Alaska Native Asian

Black/African American Native Hawaiian/Other Pacific Islander White

Veteran: Yes No Reservist/National Guard

How did you find out about the SSS Program?: Mailing Email Admission Friend Instructor

Other _____

Have you ever been a TRIO participant? Yes No

If yes, list program and school: _____

TRIO programs include Upward Bound, Talent Search, Student Support Services, Educational Opportunity Center.

WHAT IS YOUR MAJOR OR ACADEMIC INTEREST? _____

Note: Eligible students must be working towards completion of a certificate and/or first associate degree.

DROP OFF/MAIL COMPLETED APPLICATION TO:

TRIO Student Support Services
A Building, Room A-106
2000 Fifth Ave.
River Grove, IL 60171

CONTACT US:

Phone: (708) 456-0300, Ext. 3341
triton.edu/trio
TRIOSSS@triton.edu

FOR OFFICE USE ONLY

Date Received: _____ Date Accepted: _____

Eligibility: FG LI D

Disability Documentation: _____

Notarized FG Form: _____

Notarized LI Form: _____

Tax/ISIR Form: _____

Eligibility Criteria: The following information is used to determine eligibility for SSS. **Please read carefully!**
 Failure to complete the following information may significantly delay review of your application.
ALL SECTIONS MUST BE COMPLETED AND SIGNED.

STUDENT DEPENDENCY INFORMATION

Note: Please skip this section if you are 24 years or older.

- Are you married? Yes No Do you have children? Yes No
- Have you ever been a ward of the court, in foster care or an emancipated minor? Yes No
- Serving active duty in the armed forces? Yes No
- Active duty U.S. veteran released under any condition other than dishonorably? Yes No
- Are you under 18 years old with no parents or guardians? Yes No
- Are you homeless or at risk? Yes No

INCOME STATUS

Number of People in Household: _____
 Family's Taxable Income: _____ Year: _____

Note: Taxable income can be found on the federal income tax forms: IRS Form 1040.

Have you applied for financial aid? Yes No

Parent signature is required if student is dependent or under the age of 24.

FIRST GENERATION STATUS

Note: Please check the highest level of education completed for each parent/guardian.

Level	No Formal Education	Elementary/ Middle School (1-8)	High School (9-12)	Some College	Associate Degree	Bachelor's Degree	Graduate Degree
Parent 1							
Parent 2							
Guardian							

Do you reside with: Parent 1 Parent 2 Both Other _____

LEARNING OR PHYSICAL CHALLENGES (MAY ALSO BE REFERRED TO AS A DISABILITY)

You may apply for SSS if you have a medical, physical, sensory, cognitive or brain-related issue. However, you must also submit a detailed summary about the nature of the issue, written by an appropriate type of expert, to the Center for Access and Accommodative Services (CAAS) office in order to qualify under this criteria.

For more information, contact Center for Access and Accommodative Services at (708) 456-0300, Ext. 3854 or 3917.

- Do you have a diagnosed learning or physical challenge? Yes No
- Have you provided the expected kind of documentation to CAAS? Yes No In Progress

All the information provided on this page is true to the best of my knowledge. _____
 (Initials)

INDIVIDUAL NEEDS ASSESSMENT

Check all that apply to you:

- I don't know which majors would be a good fit for me.
- I don't know which careers would be a good fit for me.
- High school did not prepare me for college.
- I need to develop my writing skills.
- I need to develop my math skills.
- I achieved a GED.
- I have been out of school for more than five years.
- English as a Second Language learner.
- I need help to transfer.
- Need for academic support (Low GPA, Failing Grades).

TELL US ABOUT YOU

Please describe the main concern(s) you have about being in college.

How do you expect to use SSS resources to help you reach your goals and address challenges?

COMMITMENT TO PARTICIPATE

If accepted into the Student Support Services Program, I agree to the following:

- I will attend the SSS New Student Orientation.
- I will meet with my SSS Advisor/TRIO Mentor regularly each semester.
- I will attend a minimum of two SSS events or workshops each semester (academic, financial literacy, retreats, cultural).
- I will submit a completed FAFSA Application and at least one scholarship application annually.
- I will work with a counselor/academic advisor to obtain an academic plan.
- I will attend all classes and complete coursework in a timely manner and participate in the tutoring program as needed throughout the academic year.
- I will read emails, website, newsletters, and social media accounts.
- I will communicate regularly with SSS staff regarding schedule changes, concerns that may affect school, when graduating, transferring or leaving the SSS program.
- I understand that I may lose my status as an SSS participant if I do not follow the terms of this agreement.

AGREEMENT/RELEASE OF INFORMATION

I certify that the information I have provided on this application is, to the best of my knowledge, complete and correct.

I hereby authorize the Student Support Services staff to access my academic records and to request attendance and performance information from my instructors on my behalf. I hereby authorize my instructors to release such information. I release the staff of Student Support Services and my instructors from all legal responsibility or liability that may arise from the actions I have authorized.

I give my consent for Triton College Student Support Services Program to use my photo, video, and other images and provide information on my participation in the SSS Program on the SSS website, social media account(s), brochures and newsletters. This agreement remains in effect during my years as a student at Triton College.

Furthermore, I understand that by applying for the TRIO Student Support Services Program, I authorize the program staff to obtain records or data pertinent to my participation from other sources; such as and not limited to federal financial aid, monitoring educational progress, evaluate effectiveness of program activities, and fulfill program reporting requirements. To release and disclose information as required by law or the terms of the Student Support Services grant, to the grant funding agency of the United States government. The Student Support Services Program staff has my permission to communicate verbally and otherwise with staff, faculty and/or off-campus professionals on my behalf.

Printed Name: _____

Student Signature: _____ Date: _____

TRIO Student Support Services is funded by the U.S Department of Education.
Acceptance into the program is contingent upon meeting eligibility criteria and space availability.



Triton College

It's about you.

2000 Fifth Ave., River Grove, IL 60171
(708) 456-0300 | triton.edu | #WeRTriton

Triton College is an Equal Opportunity/Affirmative Action institution.