

## TRIO - STUDENT SUPPORT SERVICES APPLICATION 2024-2025

Per the Family Educational Rights and Privacy Act (FERPA), information in this application is **confidential** – we will protect your sensitive personal data. **Print Clearly.** Incomplete applications may be returned to you or rejected.

		Applicant Informat	ion
			Date:
Full name	<b>:</b> :		Preferred Name:
	Last	First	M.I.
Address:			
	Street Address		Apartment/Unit #
	City	State	ZIP Code
Phone: _			NSCC ID#: N00
Date of Bi	irth:	NSCC Email Address:	
	dance with federal regulat services:	ions, a student must meet o	one of the following criteria to be eligible for
•	a first generation college s parent has a Bachelor's de	165     100	
Do you have a documented disability?		☐ Yes ☐ No	If yes, have you met with Accessibility Services at NSCC?  Yes N
Do you h	ave limited income?	☐ Yes ☐ No	Verified by a SSS staff member
		Demographic Inform	nation
(Note: th	e U.S. Department of Educ	cation will not recognize othe	er designations outside of those listed below.)
Gender:	Male Female	Nonbinary or Other Gender	
Marital S	Status: Single Mar	ried Divorced Wido	wed
Citizens	hip Status: U.S. Citize	n Permanent Resident	Other:
Race or I	<b>Ethnicity</b> (check all that ap	pply):	
Black	or African American	Hispanic or Latino Wh	ite 🗌 Asian
☐ Native	e Hawaiian or other Pacific	: Islander	ian or Alaska Native
Do you s	peak English as a Second	Language (ESOL)?  Yes	s No
If yes, pr	imary language spoken: _		
Have voi	ı ever heen enrolled in an	FSOL program? ☐ Yes ☐	No

If yes, check which ones:  Upward Bound					
Academic Information  Major: Academic Advisor Name:  High School GPA (if less than 3 years after graduation):  What is your expected year of graduation from NSCC? Are you?					
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What is your expected year of graduation from NSCC? Are you?					
What is your current NSCC academic standing? Good Standing Suspension Probation					
Financial Eligibility					
Financial Engishity					
If you and/or your family filed income taxes last year, what was your combined <b>TAXABLE INCOME?</b> Note: It is REQUIRED that you indicate TAXABLE income and not total income or adjusted gross income. Taxable income is reported on your 1040. (Please note your application will be incomplete without the <b>REQUIRED FIELDS</b> marked with *).					
□ Less than \$22,590 □ Less than \$46,800 □ Less than \$71,010					
<ul><li>☐ Less than \$30,660</li><li>☐ Less than \$54,870</li><li>☐ Less than \$79,080</li></ul>					
☐ Less than \$38,730 ☐ Less than \$62,940 ☐					
*Number of people living in your household including yourself:					
*Are you designated as an Independent Student for financial aid here at NSCC?   Yes No					
*Please check all that apply: (if not applicable, please skip)					
At least 24 years old A parent A Veteran					
☐ Orphan/Ward of Court ☐ Homeless ☐ Aged out of foster care					
Have you completed a Bachelor's Degree?					
Has it been determined by a court in your state of legal residence that you are an emancipated minor or that you are in a legal guardianship?					
Permissions and Acknowledgements					
I certify that the information I provided about my family size and taxable income is true to the best of my knowledge. I also grant Northwest State Community College TRIO-Student Support Services permission to access my official records to complete my application. (Your application will not be complete without signatures and dates.)					
I give Student Support Services (SSS) permission to access my educational records, including financial aid information, for income verification and participation in the SSS program. I understand that all records are kept confidential in accordance with Northwest State Community College and Federal Privacy Laws. Yes No					
I certify that the above information is complete and accurate to the best of my knowledge					
I give permission for release of my data (name, photos, data related to awards and achievements) for purpose of awards, recognition and advertising. Yes No					

Signature				
Printed Student Name:				
Student Signature:	Date:			
Printed Parent/Guardian Name (if claimed as dependent):				
Parent or Guardian Signature:	Date:			
Completed applications may be mailed, hand-delivered, faxed/scanned,	or email.			
Return to:				
TRIO-Student Support Services 22600 St Rt 34 Archbold, OH 43502 Email: triosss@northweststate.edu				
(Please indicate "SSS Application - Your Name" in the subject line)				
Phone: 419.267.1339 Fax: 419.267.5657				
Note: Applying for this program is a commitment and we expect you to be an active participant while you are a student at Northwest State Community College.				
If you are admitted to NSCC TRIO Student Support Services, we commitment from you:	e will require the following			
<ul> <li>Meet with my Success Coach at least twice a semester</li> <li>Participate in tutoring sessions as needed</li> <li>Participate in financial aid and career development workshops and events</li> <li>Set goals with my Success Coach that lead to my planned graduation</li> <li>Work with my Success Coach to assist with transferring to a four year college after graduation, if a bachelors degree is desired</li> </ul>				
How did you learn about NSCC TRIO Student Support Ser Please circle all that apply: NSCC Staff/Faculty: Email Mailing/Flyer NSCC Website Another TRIO Student:	rvices?			